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MIAMI, FLO City/State	RIDA 33174 (305)552-5973 Zip Phone #	
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NEWFILINGS	AMENDMENTS	
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LAW OFFICES G. FRANK QUESADA

SUITE 200 1313 PONCE DE LEON BOULEVARD CORAL GABLES, FLORIDA 38134

TELEPHONE (305) 446-2517 FACSIMILE (305) 446-7521

Corporate Records Bureau Division of Corporations Department of State P.O. Box 6327 Tallahassee, Florida 32301

RE: Incorporation of El Aguila Cigars, Corp.

Gentlemen:

Enclosed please find and original and one copy of the Articles of Incorporation of the above captioned corporation.

Also enclosed is our check for the following:

Filing Fees	\$	35.00
Certified Copy		52.50
Registered Agent Designation	_	35.00
	\$2	122.50

Please certify the enclosed copy of the Charter and return to this office.

Thank you for your usual prompt and courteous attention.

Very-truly yours, G. Frank Quesada

Enclosure

Charter	Numbe	r Only					
Requester	's Name		ank Quesad				
Address	Address 1313 Ponce De Leon Bly Suite 200						
Coral Gables, FL 33134							
City	Sta	te	Zip	Phone			
<b>CORPORATION NAME</b>							

EL AGUILA CIGARS, CORP.

() Profit

( ) Non Profit	() Amendment		() Merger	
( ) Foreign	() Dissolution		() Alien Business Organization	
( ) Limited Partnership	( ) Change of Registered Agent			
() Other				
( ) Certified Copy	( ) Photo Copies		( ) Certificate Under Seal	
( ) Walk In	( ) Will Wait	( ) Pick Up	() Mail Out	
Name	C. TAX		<u></u>	
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Document	D. A CENT			
Examiner	R. AGENT			
	C. COPY	·		
Updater	TOTAL			
Verifier				
Active Judgment	N. BANK			
	BALANCE DI	UE		

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# ARTICLES OF INCORPORATION

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OF

### EL AGUILA CIGARS, CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of this corporation shall be:

EL AGUILA CIGARS CORP.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1764-1780 SW lst Street Miami, Flörida 33135

# ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

750 at \$10.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Armando B. Gallardo 13826 SWn102 Terr. Miami, Florida 33186

# ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Marielá Gallardo 13826 SW 102 Terrace Miami, Florida 33186

The undersigned has(have) executed these Articles of Incorporation this <u>22</u> day of <u>July</u>, 1997.

IncorporatorMariela Gallardo

Incorporator

STATE OF FLORIDA

COUNTY OF DADE

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared <u>Mariela Gallardo</u> \_\_\_\_\_\_, to me known to be the persons described in and who

executed the foregoing instrument or who have produced \_\_\_\_\_\_\_\_\_ as identification and who did take an oath

and acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid the <u>22</u> day of <u>July</u>, 1997.

NOTARY PUBLIC, State of Florida at Large

(Print Name) My Commission expires: NOTAFY FUELCES ATTORN OF POPUL COMMISSION NO. COSE OF

MY COMMESION EXP. MAX 1-2200

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating registered office/registered agent in the State of Florida.

1. The name of the corporation is:

EL AGUILA CIGARS, CORP.

2. The name and address of the registered agent and office is:

Armando B. Gallardo 13826 SW 102 Terrace Miami, Florida 33186

Armando B. Gallardo sident Agen

Date: July 22, 1997

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

lando 8 Gallardo ésident Agent

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