Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 PILED 97 SEP -4 AH 9: 11 SECRETARY OF STATE TALLAHASSEE, FLORIDA

SUBJECT: Leopoldo BLANCAS /NC.
(Proposed corporate name - must include suffix)

400002284664--2 -09/04/97--01055--004 ******78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

- \$70.00 Filing Fee
- \$78.75
- Filing Fee & Certificate
- □\$122.50
- □ \$131.25
- Filing Fee
- Filing Fee, Certified Copy
- & Certified Copy Certified Cop
 & Certificate

ADDITIONAL COPY REQUIRED

FROM: Leopoldo Blancas
Name (Printed or typed)

8875 2ndisTi

ST Cloud. F/ 34773
City, State & Zip

907 - 95 7 - 1819

Daytime Telephone number

Leopoldo Blancasgave

AUTHORIZATION BY PHONE TO

CORRECT CLYTICA

DATE 915 197

DOC. EXAM. BM

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Leopoldo BLANCAS Inc.

ARTICLE II PRINCIPAL OFFICE

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

8875 2Nd. ST.

ST. cloud F1 34773

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 50

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Leopoldo Blancas 8875 2Nd ST ST cloud. Fl. 34713

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Leonoldo Blancas

88 75 2NJ. ST ST Chud. Fl. 34779

Signature/incorporator

Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

8-29-97