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FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

RESTAURANT

NAME: RINCON CAMAGUEYANG REST. INC. AUDIT NUMBER..... H98000003209

DOC TYPE......FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..1 CERT. COPIES..... PAGES..... 3

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ARTICLES OF INCORPORATION OF

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RINCON CAMAGUEYANO RESTAURANT INC.

The undersigned incorporator(s), for the purpose of forming FaORIDA corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:
RINCON CAMAGUEYANO RESTAURANT INC.

The principal place of business of this corporation shall be:
1167 W. 29th STREET
HIALEAH; FE: 33010

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time 1,000 SHARES AT \$1.00 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the Initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

PRESIDENT/JOSE DELGADO 1167 W. 29th STREET HIALEAH,FL 33010

Prepared By: JOSE DELGADO

1167 W. 29th STREET HIALEAH, FL 33010 (305)884-2057 H98000003209

ARTICLE VI INCORPORATORIS

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

PRESIDENT/JOSE DELGADO 1167 W. 29th STREET "Higleah/FIX 38010

Signature(s)	of Incorporator(s)
	(fly

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 the registered office/registered agent, in the State of Florida.

2. The name and address of the registered agent and office JOSE DELGADO 1167 W. 29th STREET		
	(P.O. BOX NOT ACCEPTABLE) HIALEAH, FL 33010	
SECHELAHASSEE, FLORIDA	(CITY/STATE/ZIP) SIGNATURE DIRECTOR TITLE	1

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.

DATE