P980000 1894 (ILED

bivision of Corporations P. O. Box 6327 Talahassee, FL 32314

98 FEB 26 PM 3: 31

Tropical Leaves SECRETARY OF STATE
TALTAHASSEE, FLORIDA

(name of corporation)

800002441288--6 -02/26/98--01032-007 ****122.50 ****122.50

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Mari Davies

(individual's name)

Tropical Leaves, Inc.

(name of corporation)

MAILING ADDRESS OF CORPORATION

7480 S. W. 64 Street

Miami, F1. 33143

PHONE

(305) Area Code 667-4369

Number

e Hall

FEB 2 6 1998

Ext.

ARTICLES OF INCORPORATION

of

Tropical Leave	es, Inc.		
· ·	corporation)	FILLED	
The undersigned subscriber(s) to these Articles of Incorpor corporation under the laws of the State of Florida.	ation, natural person(s	e) competed recomplicis	he3dby form a
	PRPORATE NAME	SECRETARY OF ST TALLAHASSEE, FLO	AIC)RIDA
The name of the corporation is:	og Tra	•	
Tropical Leave	=8, Inc.		
ARTICLE II	- DURATION		
This corporation shall exist perpetually unless dissolved	according to Florida	law.	
ARTICLE II	I - PURPOSE	-	
The corporation is organized for the purpose of engaging United States and the State of Florida.	in any activities or bu	siness permitted under the	he laws of the
ARTICLE IV -	CAPITAL STOCK		
The corporation is authorized to issue one hundred	shares (100) offive	
Dollar(s) (\$ 5.00) par value Common		e designated "Common	Shares."
ARTICLE V - INITIAL REGIS	TERED OFFICE "AL	ND AGENT	
The principal office, if known, or the mailing address of		VD PIODIVI	
	the corporation is.	<u>- · </u>	
NAME Tropical Leaves, Inc.			
ADDRESS 7480 S. W. 64 Street	<u> </u>		00140
CITY Miami,	FLORIDA	ZIP	33]43
The name and street address of the Initial Registered	Agent of this Corpora	ation is:	
NAME Mari Davies			·
ADDRESS 7480 S. W. 64 Street		· · · · · · · · · · · · · · · · · · ·	
CITY Miami	FLORIDA	ZIP	33143
ARTICLE VI - INITIAL	BOARD OF DIREC	TORS	
	_) directors initially. ws, but shall never b	The number of directors	may be either he names and
NAME Mari Davies		····	
ADDRESS 7480 S. W. 64 Street			<u> </u>
crry Miami	STATE I	FL. ZII	33143
NAME			
ADDRESS	-		
CTITY	STATE	ZIF	• •
NAME			, ,
ADDRESS	£M\$\(\alpha\) \$14.1	XII	<u> </u>
CTTY	STATE	7.11	

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Mari Davies	-					
ADDRESS	7480 S. W.	64 Street					
CITY	Miami	<u> </u>		STATE	F].	ZIP	3314
NAME							
ADDRESS			-				
CITY				STATE		ZIP	
NAME							
ADDRESS							
CTTY				STATE		ZIP	
day of <u></u>	ebruary.	, 19 <u>48</u> .		raie	Danie	7	(Seal)
					,		(Seal)
STATE OF	FLORIDA)				
COUNTY (OF Dade .		SS				
before me, appeared:	a Notary Public au White Signature	thorized to take ac		in the State	· · · · · · · · · · · · · · · · · · ·	www.	ersonally
	Signature		<u> </u>		Form of Identificat	ion	<u></u>
	Signature		-		Form of Identificat	ion	
me that	e and known to be the Sheller execute on as indicated op	ed these Articles of I	Incorporation, the	at I relied upo	n the formofic	tho acknowledg dentification of t	ed before the above
ON SWIN	COMMISSION # (IICAG	Witness my ha this All Mall Notary Supature Franced Notary Signal	and and official day of	I seal in the County of the Co	19 '	atoresaid

CERTIFICATE AND_ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

98 FEB 26 PM 3: 31

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Tropical Leaves, Inc.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

7480 S. W. 64 Street

Miami, F1. 33143

Mari Davies has named

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.