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LAZARUS CORPORATE FILING SERVICE, INC.

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LOCAL REPRESENTATIVE TALLAHASSEE

900002463579--0
-03/20/98-01078-009
****122.50 ****122.50

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. MEJIA LINEN INC.

(Corporation Name)

(Document #)

2. _____
(Corporation Name)

(Document #)

3. _____
(Corporation Name)

(Document #)

4. _____
(Corporation Name)

(Document #)

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☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

K. Rolfe MAR 23 1998
K. Rolfe MAR 20 1998
W98-679

CR2E031(9/92)

FILED
98 MAR 23 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
98 MAR 20 AM 11:33
DIVISION OF CORPORATION

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 20, 1998

LAZARUS

MIAMI, FL

SUBJECT: MEJIA LINEN INC.
Ref. Number: W98000006279

We have received your document for MEJIA LINEN INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

You must list at least one incorporator with a complete business street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6932.

Kimberly Rolfe
Document Specialist

Letter Number: 498A00015163

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DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

NAME

THE NAME OF THIS CORPORATION IS: MEJIA LINEN INC.

ARTICLE II

DURATION

THIS CORPORATION SHALL HAVE A PERPETUAL EXISTENCE, UNLESS DISSOLVED ACCORDING TO LAW.

ARTICLE III

PURPOSE

THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF TRANSACTING ANY OR ALL BUSINESS FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER THE FLORIDA GENERAL CORPORATION ACT.

ARTICLE IV

CAPITAL STOCK

THIS CORPORATION IS AUTHORIZED TO ISSUE FIVE HUNDRED (500) SHARES OF ONE DOLLAR (1.00) PAR VALUE COMMON. STOCK, WHICH SHALL BE DESIGNATED "COMMON SHARES".

ARTICLE V

INITIAL REGISTERED OFFICE AND AGENT

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THIS CORPORATION IS

10154 WEST FLAGLER ST. MIAMI, FL 33174,

AND THE NAME OF THE INITIAL REGISTERED AGENT OF THIS CORPORATION AT THAT ADDRESS

IS: EDISON MEJIA

ARTICLE VI

INITIAL BOARD OF DIRECTORS

THIS CORPORATION SHAL HAVE (2) (TWO) DIRECTORS (S) INITIALLY.
THE NUMBER OF DIRECTORS MAY BE EITHER INCREASED OR DIMINISHED FROM TIME TO
TIME BY THE BY-LAWS, BUT SHALL NEVER BE LESS THAN ONE. THE NAME AND ADDRESS
OF THE INITIAL DIRECTOR OF THIS CORPORATION:

<u>EDSON MEJIA</u>	<u>CLARISSA GONZALEZ</u>	<u></u>
<u>12534 nw 7 LN.</u>	<u>12534 NW 7 LN.</u>	<u></u>
<u>MIAMI FL. 33182</u>	<u>MIAMI FL. 33182</u>	<u></u>
<u></u>	<u></u>	<u></u>

ARTICLE VII

INDEMNIFICATION

TO THE FULL EXTENT PERMITTED BY LAW, THE CORPORATION SHALL INDEMNITY EACH PERSON
MADE OR THREATENED TO BE MADE A PARTY TO ANY THREATENED, PENDING OF COMPLETED
ACTION, SUIT, OR PROCEEDING, WHETHER CIVIL, CRIMINAL, ADMINSTRATIVE OR INVESTIGATIVE
(INCLUDING, ONE IN THE RIGHT OF THE CORPORATION TO PROCURE A JUDGEMENT IN ITS
FAVOR) BY REASON OF THE FACT THAT HE OR HIS TESTATOR OR INTESTATE, IS OR WAS A
DIRECTOR, OFFICER, EMPLOYEE OR AGENT OF THE CORPORATION OR SERVED ANY OTHER
CORPORATION, PARTNERSHIP, JOINT VENTURE, TRUST OR OTHER ENTERPRISE IN ANY CAPACITY,
AT THE REQUEST OF THE CORPORATION.

ARTICLE VIII

INCORPORATED

THE NAME AND ADDRESS OF THE PERSON SIGNING THESE ARTICLES IS: _____

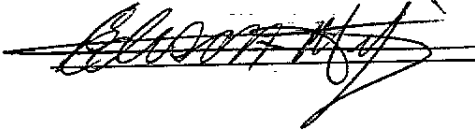
EDSON MEJIA 12534 N.W. 7 LN. MIAMI, FL. 33182

ARTICLE IX

OFFICERS

<u>EDSON MEJIA</u>	<u>PRESIDENT</u>
<u>CLARISSA GONZALEZ</u>	<u>V-PRESIDNET</u>
<u>EDISON MEJIA</u>	<u>SECRETARY/TREASURER</u>

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER HAS EXECUTED THESE ARTICLES OF
INCORPORATION ON THIS 2 DAY OF march, 1998.

A handwritten signature in dark ink, appearing to be "Blossom" followed by a stylized flourish, is written over a horizontal line.

STATE OF FLORIDA)

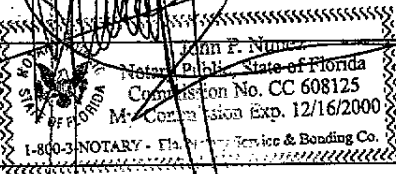
COUNTY OF DADE)

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGMENTS IN THE
STATE AND COUNTY SET FORTH ABOVE PERSONAL APPEARED EDISON MEJIA.
KNOWN TO ME AND KNOWN BY ME TO BE THE PERSON WHO EXECUTED THE FOREGOING ARTICLES
OF INCORPORATION, AND HE ACKNOWLEDGED BEFORE ME THAT HE EXECUTED THOSE ARTICLES
OF INCORPORATION.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED MY OFFICIAL
SEAL IN THE STATE AND COUNTY AFORESAID THIS 2 DAY OF MARCH

19 98

NOTARY



COMMISSION EXPIRES

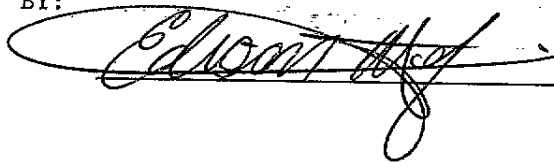
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS
WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN PURSUANCE OF CHAPTER 48.091 FLORIDA STATUTE, THE FOLLOWING IS SUBMITTED, IN
COMPLIANCE WITH SAID ACT:

FIRST -- THAT MEJIA LINEN INC.
DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS PRINCIPLE
OFFICE, AT 10154 WEST FLAGLER ST. MIAMI FL. 33174
CITY OF MIAMI COUNTY OF DADE,
STATE OF FLORIDA, AND NAMED: EDISON MEJIA
LOCATED AT: 10154 WEST FLAGLER ST. MIAMI FL. 33174
CITY OF MIAMI COUNTY OF DADE,
STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS OF THE ABOVE STATED
CORPORATION, AT PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN
THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISION OF SAID ACT RELATIVE TO
KEEPING OPEN SAID OFFICE.

BY:



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98 MAR 23 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA