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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

NAME: TOMMY'S CUTTING SERVICE, INC.

AUDIT NUMBER..... 498000013458

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

CERT. OF STATUS...1

PAGES..... 3

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ARTICLES OF INCORPORATION

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TOMMY'S CUTTING SERVICE, INC.

SECRETARY OF STATE

TALLAHASSEE FLORIDA TALLAHASSEE FLORIDA corporation under the florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

<u>ARTICLE I NAME</u>

The name of the corporation shall be: TOMMY'S CUTTING SERVICE, INC.

The principal place of business of this corporation shall be:
840 W. 18th STREET HIALEAH, FLORIDA 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 is:

500 SHARES @ \$1.00

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):

TOMAS J. VARGAS 840 W. 18th STREET HIALEAH, FL. 33010

PREPARED BY: ARMANDO CABRERA 5490 Griffin Road Davie, Fl. 33314 (954) 587-6718

ARTICLE VI INCORPORATOR(S)

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

TOMAS J. VARGAS 840 W. 18th STREET HIALEAH, FL. 33010

executed these Articles of Incorporation this _______, 1998

Signature(s) of Incorporator(s)

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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.

1. Me name of me c	orporation.
TOM	MY'S CUTTING SERVICE, INC.
2. The name and add	dress of the registered agent and office is:
	AS J. VARGAS W. 18th STREET
(P.	O. BOX NOT ACCEPTABLE)
HIAI	EAH, FLORIDA 33010
	(CITY/STATE/ZIP)
	SIGNATURE To- Van
6 0	SIGNATURE
PN 12: 56 FLORIDA	TITLE Prosident.
U 5	111,65
SSEE	DATE 07-10-58
JUL WEITAN AHIAS	
86 34	
HAVING BEEN NAMED	TO ACCEPT SERVICE OF PROCESS FOR THE
ABOVE STATED CORPO	PRATION, AT THE PLACE DESIGNATED IN THIS Y 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 ACCEPT THE DUTIES AND OBLIGATIONS OF
SECTION 607.325, FLO	RIDA STATUTES.
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