

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

300002666953--8

-10/19/98--01083--011

\*\*\*\*\*78.75 \*\*\*\*\*78.75

OFFICE USE ONLY

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

1. PROGRAMAS KATO, INC.

(Corporation Name)

(Document #)

2. Translation: Kato programs, inc

(Corporation Name)

(Document #)

3. \_\_\_\_\_

(Corporation Name)

(Document #)

4. \_\_\_\_\_

(Corporation Name)

(Document #)

98 OCT 19 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

RECEIVED  
98 OCT 9 AM 11:10  
VISION OF CORPORATION

☒ Walk in

☐ Mail out

☒ Pick up time

9:10

☐ Will wait

☐ Photocopy

☒ Certified Copy

☐ 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

Examiner's Initials

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be:

*PROGRAMAS KATO, Inc.*

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TALLAHASSEE FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

*10300 S.W. 72<sup>nd</sup> AVE. Suite 499  
MIAMI, FL.*

### ARTICLE III SHARES

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

*\$1,000.00*

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*TANI GONZALEZ  
10300 S.W. 72<sup>nd</sup> AVE.  
MIAMI, FL.*

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

TARI GONZALEZ  
10300 SW 72<sup>nd</sup> AVE. Suite 499  
MIAMI, FL.

**ARTICLE VI DIRECTOR(S)**

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

EDUARDO TORRES - PRESIDENT  
RAFAEL TORRES - VICE-PRESIDENT.  
TARI GONZALEZ - SECRETARY - TREASURER.  
10300 SW 72 AVE Suite: 499  
MIAMI, FL.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 16 day of October, 1998.

Tari Gonzale  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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. The name of the corporation is: PROGRAMAS KATO, Inc.

2. The name and address of the registered agent and office is:

TARI GONZALEZ

(NAME)

10300 SW 72<sup>nd</sup> AVE. Suite 499

(P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33

(CITY/STATE/ZIP)

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.

SIGNATURE

Tari Gonzalez

DATE

October 16, 1998

SECRETARY OF STATE  
TREASURY  
CLERK  
FIDELITY & SECURITY  
CORPORATION  
FLORIDA  
OCT 19 PM 1:38

FILED

REGISTERED AGENT FILING FEE: \$35.00