Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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EMCrA

Enclosed is an	original and	one(1) copy	of the articles	of incorporation	and a check for
TITLE TO CIT	OTTENT MAN	. ~~~~(~) ~~₽)	Ox 1000		

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

□\$78.75

\$87.50

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME The name of the corporation shall be: EMERAID CHOSSES, INC
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 6426 NW 199 LGNR HIALeg4, FL 33615
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: John Haskins 6426 NW 199 L9NC HiAleuli FC 33015
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:
FABIO J. PINZON 6426 NW 199 LANE HIALEGY, FL 33015 7010 Jan. 19-1999
Signature/Incorporator Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

Date