

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 : (305)716-0346 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

L & N DISTRIBUTORS INC.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION

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L & N DISTRIBUTORS INC.

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING Λ CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT, HEREBY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE 1 NAME

THE NAME OF THE CORPORATION SHALL BE: L & N DISTRIBUTORS INC.

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE:

8625 N.W. 8th. St. #221, Miami, Florida, 33126

ATICLE II NATURE OF B USINESS

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 AGGEGATE NUMBER OF SHARES OF STOCK AND ITS VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100 SHARES AT \$ 1.00 EACH

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).

PREPARED BY:

FLORENTINO NAGARIAN 8625 N.W. 8th. st. #221 Miami, florida, 33126 Tel: (305) 887-8075 Florentino Nagarian 8625 N.W. 8th. St. #221 Miami, Florida, 33126

JOSE LOPEZ 8625 N.W. 8th. St. #221 Miami, Florida, 33126

ARTICLES VI INCORPORATOR(S)

THE NAME(S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO THIS ARTICLES OF INCORPORATION IS (ARE):

FLORENTINO NAGARIAN 8625 N.W. 8th. St. #221, Miami, Fla. 33126

JOSE LOPEZ 8625 N.W. 8th. St. #221, Miami, Fla. 33126

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR(S) HAS (HAVE)

EXECUTED THESE ARTICLES OF INCORPORATION THIS 25th.

DAY OF JANUARY -, 1999.

SIGNATURE (S) OF INCORPORATOR(S)

175

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.

t.	THE NAME OF THE CORPORATION:	
	L & N DISTRIBUTORS INC	
2.	THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:	
FLORENTINO NAGARIAN 8625 N.W. 8th. St. #221		
(P.O. SOX NOT ACCEPTABLE)		
(CITY/STATE/ZIP)		
	BIGNATURE	
	TITLE PRESIDENT	
	DATE 01/ /99	

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY 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 OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTIONS OF SECTION 607.325, FLORIDA STATUTES.

DATE 01/2899.