P999993339526

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

SUBJECT:		TRIANA, INC.	suffix)	-·
1 0 0 2 5 4 1 8 1 0 -04/27/99-01097-008 ******87.50 ******87.50 ******87.50 Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL C	OPY REQUIRED	
FROM:	ADIEL LEVI T	CRIANA		-
	Name (Printed or typed)			무
	3019 NW 90 S	STREET	_	SECRETARY NSION OF CO
	Address		-	PR 2
	MIAMI, FLORI	DA 33147		J PP
•	City, St	tate & Zip	 · .	STI ORI

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

Daytime Telephone number

(305)693-3604

430

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:

ADIEL LEVI TRIANA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3019 NW 90 STREET

MIAMI, FLORIDA 33147

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES - COMMON

<u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and Florida street address of the initial registered agent are:

ADIEL LEVI TRIANA 3019 NW 90 STREET MIAMI, FLORIDA 33147

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ADIEL LEVI TRIANA 3019 NW 90 STREET MIAMI, FLORIDA

(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

> Registered Agent Signature