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Humberto Req <u>National as</u> 11890 S 76' <u>Diami</u> City/State/Z	H. Pachecker  uestor's Name  ac. for Jareign alter  Address P. H.  JL 33184  ip Phone #	neig, P.A. 200002841742——4 -04/16/9901036011 *****70.00 *****70.00 Office Use Only
1(Corpo	ration Name) (Doc	
(Corpor	ration Name) (Doci	ument #)
☐ Walk in ☐	Pick up time Photocopy	Certified Copy
Profit NonProfit Limited Liability Domestication Other	AMENDMENTS  Amendment  Resignation of R.A., Officer/ Director  Change of Registered Agent  Dissolution/Withdrawal  Merger	FILED  99 MAY -4 PM 4: 15  SECRETARY OF STATE TALLAHASSEE, FLORIDA
Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION  Foreign  Limited Partnership  Reinstatement  Trademark	J -9217
[CP2F031/1/05)	Other	T. SMITH MAY 0 4 1999.  Examiner's Initials



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 19, 1999

HUMBERTO H. PACHECKER NATIONAL ASSC. FOR FOREIGN ATTORNEYS, P. 11890 S.W. 8TH ST., P.H. MIAMI, FL 33184

SUBJECT: FLORIDA PARALEGAL CORPORATION

Ref. Number: W99000009217

We have received your document for FLORIDA PARALEGAL CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

The registered agent must sign accepting the designation.

Bylaws are not filed with this office. Please retain them for your records.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6927.

Letter Number: 299A00020153

Tracy Smith Document Specialist

#### ARTICLES OF INCORPORATION

### ARTICLE I

CORPORATE NAME

The name of the Corporation is CAB & APB, Corp.

#### ARTICLE II

INITIAL PRINCIPAL OFFICE AND MAILING ADDRESS

The principal office of the corporation is located at: 11890 S.W. 8th Street, Suite 201, Miami, Florida 33184 and the mailing address is: P.O. Box 998410, Miami Florida 33299.

#### ARTICLE III

#### **PURPOSE**

The purpose of the Corporation is to engage in any lawful act or activity for which a corporation may be organized under the Law of the State of Florida.

#### ARTICLE IV

#### REGISTERED OFFICE/AGENT

The street address of the Corporation's initial registered office in the State of Florida is 11890 S.W. 8th Street, PH, Dade County, Miami, Florida 33184; and the name of its initial registered agent at such address is Humberto H. Pachecker, National Association for Foreign Attorneys, P.A..

#### ARTICLE V

#### AUTHORIZED CAPITAL STOCK

The total number of shares of which the Corporation shall have the authority to issue are 100, and the par value of each share shall be \$ 50.00, with identical rights and privileges.

#### ARTICLE VI PROVISIONS

The provisions for the regulations of the internal affairs of the Corporation shall be as set forth in the bylaws.

## ARTICLE VII DURATION

The duration of the Corporation shall be perpetual.

## ARTICLE VIII BOARD OF DIRECTORS

The number of directors constituting the initial Board of Directors of the Corporation is two.

The name and address of each person who is to serve as members of the initial Board of Directors of the Corporation are as follows:

Carlos Alberto Buendía,

P.O. Box 998410, Miami Florida 33299

Astrid Pescatore de Buendía 24 Key West Court, Weston Florida 33326

IN WITNESS THEREOF, the undersigned incorporator has executed these Articles of Incorporation on this, the third day of May, 1999.

Incorporator 1: Carlos Alberto Buendía

Incorporator 2: Astrid Pescatore de Buendía

#### **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 agent / registered office in the State of Florida.

- 1. The name of the Corporation is CAB & APB, CORP.
- 2. The name and address of the registered agent and office is

N.A.F.A. ATTORNEYS, PA., 11890 SW 8 Th. Street, PH – 4, Miami, Florida 33184.

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 A REGISTERED AGENT.

Signature

May 3, 1999

Date