(Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S), & DOCUMENT NUMBER(S) (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Pick up time 2,00 Certified Copy Walk in Certificate of Status Will wait Photocopy DMail out AMENDMENTS NEW FILINGS AT JULY 28° Amendment Profit Resignation of R.A., Officer/Director NonProfit 🔔 Change of Registered Agent Emited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALAFICATION Annual Report -04/16/99--01062--026 Foreign _*****78.75 *****78.75 Fictitious Name Lingted/Partnership Name Reservation Reinstatement Trademark Other Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 16, 1999

LAZARUS

MIAMI, FL

SUBJECT: CHOPIN PLAZA CORP. Ref. Number: W99000009119

We have received your document for CHOPIN PLAZA CORP.. However, the document has not been filed and is being returned for the following:

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.

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 999A00019606

99 APR 19 PM



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 19, 1999

LAZARUS

MIAMI, FL

SUBJECT: CHOPIN PLAZA CORP. Ref. Number: W99000009119

We have received your document for CHOPIN PLAZA CORP.. However, the document has not been filed and is being returned for the following:

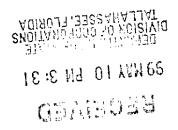
The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One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

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) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 399A00020200





May 21, 1999

LAZARUS

MIAMI, FL

SUBJECT: CHOPIN PLAZA CORP.

Ref. Number: W99000011911

We have received your document for CHOPIN PLAZA CORP.. However, the document has not been filed and is being returned for the following:

Must have the original letter of similarity of Corporate Name. *******

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) 487-6934.

Letter Number: 599A00028156

Loria Poole Corporate Specialist

May 24, 1999

Division of Corporation P.O. Box 6327 Tallahassee Fl. 332314

Dear Members of The Division of Corporation,

This letter is to respectfully request the reconsideration of the name, "Chopin Plaza" that I have intended to file. I understand that the name "shopping Plaza" is filed; and that the pronunciation may be similar. However "Chopin Plaza" is intended to give tribute to one of the worlds best composers and in no way is intended to sound like the word "Shopping" but like the actual name of the artist. Please accept my application.

Sabrina S. Hernandez

99 MAY 10 PM 3: 48
SECRETARY OF STATE

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 Icorporation.

ARTICLE I NAME

The name of the corporation shall be:

Chopin Plaza Corp.

99 HAY 10 PM 3: 48
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRICIPAL OFFICE

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

55 W 3rd Street Higlegh, Fl 33010

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND SRIEET ADDRESS

The name and address of the initial registered agent is:

Sabring S. Hernandez 55 W 3rd Street Highesh, Fl 33010

ARTICLE V INCORPORATOR(S)

2201440

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

Sabring S. Lernandez

55 a) 3rd 5t.

Highegh, Fl 33010

ARTICLE VI DIRECTOR(S)

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

Sapring S. Hervavolez	A80
55 W. 3rd St. Highenh, FT 33010	

Signature

Signature

Articles of Incorporation Filing Fee - \$35

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:
••	
2.	The name and address of the registered agent and office is:
	shows Herugudec
	(NAME)
	5517-31d Street
	(P.O. BOX NOT ACCEPTABLE)
	16/1/2007
	M9/egh 11,55010
	(CITY/STATE/ZIP)
	/ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
PRODES REG AGI THI FAI	CESS FOR THE ABOVE STATED COLORS OF THE APPOINTMENT AS SIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS SIGNATED IN THIS CAPACITY. I FURTHER GISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER GISTERED AGENT HE PROVISIONS OF ALL STATUTES RELATING TO REE TO COMPLY WITH THE PROVISIONS OF MY DUTIES, AND I AM E PROPER AND COMPLETE PERFORMANCE OF MY POSITION AS MILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS GISTERED AGENT.
PRODES REG AGI THI FAI	GCESS FOR THE ABOVE STATED CONTROL OF THE APPOINTMENT AS SIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS SIGNATED IN THIS CAPACITY. I FURTHER GISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER GISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER GISTERED AGENT AND AGENT AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS

REGISTERED AGENT FILING FEE: \$35.00