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(Requestor's Name)		~	: 05/10/990505	1081020
3320 S.W. 87th AVENUE (Address)			*****78.75	*****78.7
MIAMI, FLORIDA (305)552-59	73		,	
(City, State, Zip) (Phone #				
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CORPORATION NAME(S) & DO	CUMENT NUM	BER(S) (if known):		 }
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#### 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 kerperstion.

#### ARTICLE I NAME

The name of the corporation shall be:

Alanda Creations Incorporated

#### ARTICLE II PRICIPAL OFFICE

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

14863 SW 152 Place Miami, FL. 33196

#### 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:

Caroling Dahl 14863 SW 152 Place Miami, Fl. 33196

#### ARTICLE V INCORPORATOR(3)

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

Brian and Carolina Dahl 14863 SW 152 Place Miami, Fl. 33196

#### ARTICLE VI DIRECTOR(S)

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

Brian and Carolina Dahl 14863 SW 152 Place Miami, Fl. 33196

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this <u>5th</u> day of <u>May</u>, 1999.

Signature

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: Alanda Creations Incorporated
2.	The name and address of the registered agent and office is:
	Carolina Dahl (NAME)
	(NAME)
	14863 SW 152 pl.
	(P.O. BOX NOT ACCEPTABLE)
	- Miami, Fl. 33196 (CITY/STATE/ZIP)
	(CITY/STATE/ZIP)
PRODES REC AGI THE	VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF DCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE SIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS DISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER REFER TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AMMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITIONAS OF

REGISTERED AGENT FILING FEE: \$35.00