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FILED 99 AUG 16 PM 12: 50 SECRÉTARY OF STATE TALLAHASSEE, FLORIDA

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

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SODIECT:					
·	(Proposed corporate name - must include suffix)				
	•	•			
	•				
	•				
Enclosed is an original ar	nd one(1) copy of the articl	es of incorporation and a	check for :		
□ \$70.00	\$78.75	≥ \$122.50	\$131.25		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
· · ·	& Certificate	& Certified Copy	Certified Copy		
		а соганов, сору	& Certificate		
•	,		& Cerunicate		
1		ADDITIONAL CO	DV DEATHDED		
	•	ADDITIONAL CO	TI KEQUIKED		
• • • • • • •	*				
FROM:	MR. EDUA	RDO ALONS	·)		
	Name (Printer	d or typed)			
	ı	•	•		
·	1704 5.0	U ST AUE			
-	Addre	SS			

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

Daytime Telephone number

ARTICLES OF INCORPORATION

	SAURS	of of	0	
	SANES	name of corporat	ion)	
The undersigned s corporation under	subscriber(s) to these Articles of r the laws of the State of Flor	Incorporation, na		ent to contract/hereby form a
,		E I - CORPORA	TE NAME	
The name of the		5D, C	ORP.	SEERS
	ART	ICLE II - DURA	ITTON	0,7
This corporation s	shall exist perpetually unless d			P
•		ICLE III - PURI		
The corporation is United States and	organized for the purpose of e the State of Florida.			nitted under the laws of the
	ARTICL	E IV - CAPITAL	. STOCK	
The corporation is	authorized to issue /	000	shares (/000) of	ONE
Dollar(s) (\$/	par value C	ommon Stock, w	hich shall be designate	ed "Common Shares."
•	ARTICLE V - INITIAL	REGISTERED	OFFICE AND AGEN	T
The street address	of the Initial Registered Agent	office and the na	me of the Initial Regist	ered Agent at that office is:
NAME	MR. EDVA			
ADDRESS	1704 S.W			
CITY	MIAMI	1		ZIP 33/55
The principal office	e, if known, or the mailing ad	ress of the corpo	oration is:	
NAME	SANED	CORP.		
ADDRESS			AVENUE	AV 333 (1) Avenue
CITY	MIAMI	F	LORIDA	ZIP 33155
	ARTICLE VI - IN			
This corporation sha increased or dimini addresses of the in	all have TWO (ashed from time to time by the itial director(s) of the corporation	Bv-Laws but ch	all never be less than	of directors may be either one (1). The names and
NAME	MR. EDUA	RDO A	LONSO	
ADDRESS			VENUE	
CITY	MIAMI		TATE FLA	ZIP 33 155
NAME	MRS. UIV	IAN S	AN JUAN.	· <u></u>
ADDRESS	1704 S.U	57	AVENUE	
CITY	MIAMI	S1	TATE FCA	ZIP 33155
NAME				1
ADDRESS		· · · · · · · · · · · · · · · · · · ·		
CITY FORM 215 APPENDING	/	ST	ATE	ZIP
FURM 215: ARTICLES (OF INCORPORATION, PAGE 1	PAGE 1		SEMINOLE-MIAMI 012593

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

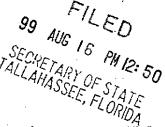
NAME	MR.	EDUARDO	ALONS	·O	
ADDRESS	1704	S.W 57	AUENO	'E	n time. A
CITY	MIAM	/	STATE F	LA	ZIP 33/\$\$
NAME	MRS.	VIVIAN	SAN. J	· VAN.	
ADDRESS	1704	3.W 57	AVEN	IUE	
CITY	MIAM	<u>/ , </u>	STATE FA	-A .	ZIP 23/55
NAME		/		. 1	
ADDRESS					
CITY	<u> </u>		STATE		ZIP

	subscriber(s) have executed these Articles of Incorporation thi	s <u>9</u>
day of <u>AUEUST</u> , 19 <u>94</u> .		
		(Seal)
	TO ALOUSO	(Seal)
	X DUVIAN SAN JUAN.	(Seal)

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF



SANED, COAP.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 1704 S.W ST AVENUE

MIAMI - FLA - 33155

has named MR, EDUARDO ALOK

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

EDUARD(yegistered agent) ALONSO