# PHONO 31490

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

SUBJECT:

300003001993--6 -09/30/99--01079--012 \*\*\*\*\*87.50 \*\*\*\*\*87.50

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inclosed is an original and one(1) copy of the article	es of incorporation and a	check for:
\$70.00 \$78.75  Filing Fee Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: RAUL CHOQUE	3	

Address

City, State & Zip

Daytime Telephone number

MIAMI

305 - 895 - 7003

33181

INC.

RCH IMPORT EXPORT

North

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

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# 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:

RCH Import Export Inc.

### ARTICLE II PRINCIPAL OFFICE

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

1930 North Hibiscus Dr.

North Miami, Fl 33181

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Raul Choque

1930 North Hibiscus Dr.

North Miami, Fl 33181

### ARTICLE V INCORPORATOR

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

Raul Choque

1930 North Hibiscus Dr.

North Miami, Fl 33181

Signature/Incorporator

09/28/99 Date

(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

Signature/Registered Agent

09/28/99

Date.