

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE, INC.

(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):

1. ECUAIMPORT, INC.

(Corporation Name)

(Document #)

2. (Corporation Name)

(Document #)

3. (Corporation Name)

(Document #)

4. (Corporation Name)

(Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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*****78.75 *****78.75

Examiner's Initials

**ARTICLES OF INCORPORATION
OF
ECUAIMPORT, INC.**

THE UNDERSIGNED, have executed the following document as incorporators of the above named corporation, a corporation organized under the laws of the State of Florida and all rights, duties and obligations of the undersigned as incorporators, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of the Corporation shall be:

ECUAIMPORT, INC.

ARTICLE II

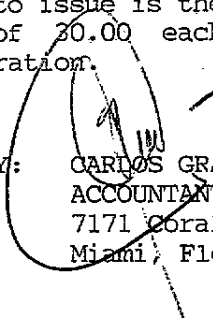
This Corporation shall commence existence upon the filing of the Articles of Incorporation by the department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

This Corporation may engage or transact in any and all lawful activities or business permitted under the laws of the United States, State of Florida or any other State, Country, Territory or Nation.

ARTICLE IV

The aggregate number of shares which this corporation shall have authority to issue is the total of 100 shares, having an individual par value of 20.00 each, and shall be only common class of stock on this Corporation.

PREPARED BY:  CARLOS GRANIZO
ACCOUNTANT
7171 Coral Way Suite, 400
Miami, Florida 33155

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99 OCT 14 PM 2:07
TALLAHASSEE FLORIDA
SECRETARY OF STATE

ARTICLE V

The name and address of the initial registered agent, registered office, and principal office of this corporation shall be:

XAVIER SABANDO
6422 Collins Avenue 1401
Miami Beach, FL 33140

ARTICLE VI

The initial Board of Directors shall consist of two persons and the name of the persons who are to serve as initial Directors are:

XAVIER SABANDO
6422 Collins Avenue Suite, 1401
Miami Beach, Florida 33140


PRESIDENT

ALLAN HARALDSSON
6422 Collins Avenue Suite, 1401
Miami Beach, Florida 33140


**VICE-PRESIDENT
SECRETARY/TREASURER**

ARTICLE VII

The name and address of the incorporators executing these Articles of Incorporation are:

XAVIER SABANDO
6422 Collins Avenue Suite, 1401
Miami Beach, FL 33140

IN WITNESS WHEREOF, The undersigned incorporator has executed these Articles of Incorporation this 7th day of October, 1999.


XAVIER SABANDO

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That ECUAIMPORT, INC.
(Name of Corporation)

desiring to organize under the laws of the State of Florida with its principal office, as indicated in the Articles of Incorporation at the City of Miami, County of Dade State of Florida has named XAVIER SABANDO
(Name of Register Agent)

located at 6422 Collins Avenue Suite, 1401 Miami Beach, FL 33140
(Street address and number of building,
Post Office Box address not acceptable)

City of MIAMI, County of DADE, State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By: _____

XAVIER SABANDO
Signature
Register Agent

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SECRETARY OF STATE
TALLAHASSEE FLORIDA