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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, JINC

Account Number .

Phone : (305)552-59/3
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FLORIDA PROFIT/NON PROFIT CORPORATION DNB INTERNATIONAL ARTIFACTS & ANTIQUES INC

> 0 Certificate of Status Certified Copy 1 Page Count

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SECRETARY OF STATE TALLAHASSEE FLORIDA

## 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 INCORPORATION.

### ARTICLE I - NAME

THE NAME OF THE CORPORATION SHALL BE:

DNB INTERNATIONAL ARTIFACTS & ANTIQUES INC

#### ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

6800 Swi 40 ST # 502 Miami FL 33/55

### **ARTICLE III - SHARES**

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

<u>ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

Angel Mirabal Martinez
6800 Sw 40 St #502
Miami FL 33155.

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## ARTICLE V - INCORPORATOR

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

Angel mirabal martinez
68005W 40.5t # 502
Wiami FL 33155
The undersigned incorporator has executed these Articles of Incorporation this

ersigned incorporator has executed these Articles of Incorporation this 2 | day of February 20 \\ .

Signature

# ARTICLE VI- DIRECTOR (S)

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

Angel mirabal martinez (P)
6800 SN 40 St 450L
Miami FL 33155

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT
/REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature

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