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Florida Department of State

Division of Corporations Public Access System

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Ta:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : INCORPORATETIME.COM, INC.

Account Number : I19990000221 Phone

: (631)224-9004

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FLORIDA NON-PROFIT CORPORATION

Cilliana Foundation INC.

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Corporate Filing

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10/5/2003

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ANTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATION FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA NOT FOR PROFIT CORPORATION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE I -NAME

THE NAME OF THE CORPORATION SHALL BE:

Cilliana Foundation INC.

ARTICLE II -PRINCIPAL OFFICE

The principal place of business & mailing address of this corporation shall be

2904 Crescent PL Miramar, FL 33025

ARTICLE III -PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are): Non-Profit Organization as recognized in section 501(c)(3) of the IRS Non-Profit Code Status for a non-profit organization which mission is to provide educational and health services for under privileged Hailian women and children in the United States and Haiti.

ARTICLE IV -MANNER OF ELECTION OF DIRECTORS:

The manner in which the directors are elected or appointed is:

AS STATED IN THE BYLAWS OF THE CORPORATION,

ARTICLE V -INITIAL REGISTERED AGENT AND STREET ADDRESS:

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

Andree Auguste 2904 Crescent PL Miramar, FL 33025 03 OCT -6 AM 8: 42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VI-INCORPORATOR:

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

Andree Auguste 2904 Crescent PL Miramar, FL 33025

Andree Auguste, Incorporator

Date

Having been named registered agent and to accept service of process for the above stated corporation as 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.

Andree Auguste, Registered Agent

Date

03 OCT -6 AM 8: 42 SECRETARY OF STATE AND ASSEE, FLORIDA