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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 922-4001

From: Account Name : BUSINESS WORLD TRANSACTIONS, INC.  
Account Number : 104512000707  
Phone : (305) 867-8448  
Fax Number : (305) 264-0232

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FLORIDA PROFIT CORPORATION OR P.A.

FADE CITY CORP.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I

#### NAME

The name of the corporation shall be: FADE CITY CORP.

### ARTICLE II

#### PRINCIPAL OFFICE

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

8360 NW 103 ST #204  
HIALEAH, FL 33016

### ARTICLE III

#### SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated COMMON SHARES.

### ARTICLE IV

#### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JORGE MENENDEZ  
8360 NW 103 ST #204  
HIALEAH, FL 33016

Prepared By: JORGE MENENDEZ  
8360 NW 103 ST #204  
HIALEAH, FL 33016  
(305) 823-6260

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**ARTICLE V  
INCORPORATOR(S)**

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

JORGE MENENDEZ  
8360 NW 103 ST #204  
HIALEAH, FL 33016


DIRECTOR & PRESIDENT

SOLEDAD SERRANO  
8360 NW 103 ST #204  
HIALEAH, FL 33016

VICE-PRESIDENT

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Signature  
  
\_\_\_\_\_  
Signature

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

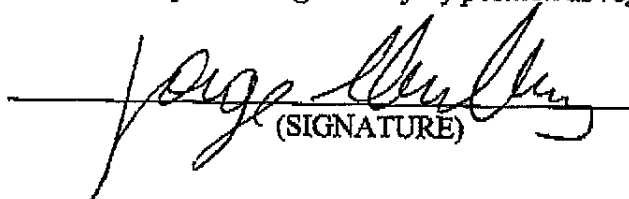
PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: FADE CITY CORP.

2. The name and address of the registered agent and office is:

JORGE MENENDEZ  
8360 NW 103 ST #204  
HIALEAH, FL 33016

*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)

(DATE)

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