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TRANSMITTAL LETTER

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

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-07/03/00--01071--006
*****78.75 *****78.75

SUBJECT: BOMSON PARTY INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JUL -3 AM 10:52

FILED

FROM: MANUEL MOLINA
Name (Printed or typed)

10026 HAMMOCKS BLVD. STE 205
Address

MIAMI, FLORIDA 33196
City, State & Zip

305-4081627
Daytime Telephone number

JUL 5 2000
F. G. 2000

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: BOMBON PARTY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 3200 COLLINS AVE SUITE 95
MIAMI BEACH FL. 33140

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO ENGAGE IN ANY ACTIVITY OR
BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES
AND OF THIS STATE.

ARTICLE IV SHARES

The number of shares of stock is:

100 (ONE HUNDRED)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

MONICA MENASHE, 3200 COLLINS AVE. STE. 95 MIAMI BEACH FL. 33140

MILENA VILLA 4229 W. 8TH ST. HIALEAH FL 33012.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

MANUEL MOLINA

10026 HAMMOCKS BLVD. STE. 205 MIAMI FL. 33196

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MONICA MENASHE, 3200 COLLINS AVE. STE. 95

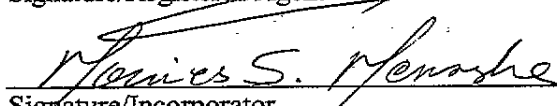
MIAMI BEACH FL. 33140

MILENA VILLA 4229 WEST 8TH ST. HIALEAH FL. 33012

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent

6/29/2000
Date


Signature/Incorporator

6/29/2000
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA