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| O E USE ONLY (LIM | 64516 |
| EXPRESS CORPORATE FILING SERVICE INC. (Requestor's Name) | |
| 1000 PONCE DE LEON BLVD. STE: 101 (Address) CORAL GABLES, FL 33134 305-444-4994 (City, State, Zip) (Phone #) | 1000044505112 -06/28/0101105007 ******78.75 *****78.75 |
| | OFFICE USE ONLY |

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

| 1 BRAZ-US | A FASHIONS, CORP. |) |
|-----------------------|---------------------------------------|---------------------------------------|
| (Corporation Name) | | |
| 2. (Corporation Name) | (Document #) | ALLA |
| 3(Corporation Name) | (Document #) | |
| 4, (Corporation Name) | (Document #) | ASSEE FM |
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| Mail out Will wait | Photocopy Certificate of S | Status Dr. O |
| NEW FILINGS | AMENDMENTS | 20 DIVE |
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| NonProfit | Resignation of R.A., Officer/Director | FICTOR UN OFFICE |
| Limited Liability | Change of Registered Agent | EHCIDE 28 ORA |
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| OTHER FILNGS | REGISTRATION/ OUALIFICATION | |
| Annual Report | Foreign | |
| Fictitious Name | Limited Partnership | |
| Name Reservation | Reinstatement | • |
| | Trademark | |
| | Other | Examiner's Initials |

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Date JUNE 27, 2001

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Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Re_____, Inc. (name of corporation)

Gentlemen.

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

(individual's name)

· _. *....

BRAZ-USA FASHIONS, CORP. (name of corporation)

.

| MAILING ADDRESS OF CORPORATION | . · |
|--------------------------------------------------------|-----|
| | |
| N. MIAMI BEACH, FLORIDA 33160 | |
| PHONE | |
| ((305)) <u>949-3680</u> Area Code Phone Number Ext | |

BRAZ-USA FASHIONS, CORI

(name of corporation)

The undersigned subscriber(s) to these Articles of incorporation, natural person(s) competent to contrain form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

CORP BRAZ-USA FASHTONS · 1,.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Elorida law.

ARTICLE III - PURPOSÉ

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

) of ONE 500 FIVE HUNDRED shares (The corporation is authorized to issue) par. value Common Stock, which shall be designated "Common Shares". Dollar(s) (\$_1.00 · · ·

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

| NAME | MARINEZ PORRUA |
|---------|----------------------------------------|
| ADDRESS | 3660 NE 166 ST #414 |
| CITY | N. MIAMI BEACH STATE FLORIDA ZIP 33160 |

The principal office, if known, or the mailing address of the corporation is:

| NAME | BRAZ-USA FASHIONS, CORP. | · · · · · · · · · · · · · | | . * ' | | | |
|---------|--------------------------|---------------------------|---------|--------------|-------|----------------------------------------------------------------------------------------------------------------|--|
| ADDRESS | 3660 NE 166 ST #414 | | | | | | |
| CITY | N. MIAMI BEACH | STATE | FLORIDA | ZIP | 33160 | the second s | |

ARTICLE VI - INITIAL BOARD OF DIRECTORS

__) directors initially. The number of 2 This corporation shall have ______TWO__ directors may be either increased or diminished from time to time by the By-Laws, but shall be less thatn one (1). The names and addresses of the initial director(s) of the corporation are as follows:

| | | | + Ca 👘 💡 | | | | | | | |
|---------|---------------------|----------------|-----------|-----|--------|-------------|----------|--|--|--|
| NAME | MARINEZ PORRUA I | RESIDEN | | | | ·· | | | | |
| ADDRESS | 3660 NE 166 ST #414 | الاحتادية السو | ••••• | | | د | | | | |
| CITY | N. MIAMI BEACH | STATE | FLORIDA | ZIP | _33160 | | | | | |
| NAME | RITA DIAS DE MORAES | VICE | PRESIDENT | | | | · •· · · | | | |
| ADDRESS | 3660 NE 166 ST #414 | - | | | | a - | | | | |
| CITY | N. MIAMI BEACH | STATE | FLORIDA | ZIP | 33160 | | | | | |
| NAME | | | | | | | - | | | |
| ADDRESS | | | | | | | | | | |

| The m | mes and addresses of t | Article VII the incorporate | - INCOR ors signing | PORATORS these Articles of | f Incorpor | ation are as | follows: | |
|----------------------------------------------|-----------------------------------------|---------------------------------|----------------------------------------|--------------------------------------------------------------------------|-----------------------------|----------------|-----------------------|---------------------------------------|
| NAME | MARINEZ PORRI | тл | | 1 | | | ند <u>-</u> | |
| ADDRESS | 3660 NE 166 ST | | | | | | | |
| CITY | N. MIAMI BEACH | I | STAŤE | | ZIP | 33160 | | |
| NAME | RITA DIAS DI | E MORAES | | | | 141. s | tan <u>a</u> si ta si | |
| ADDRESS | 3660 NE 166 ST | | | | | | | - 1 1 |
| CITY | N. MIAMI BEACH | | STATE | FLORIDA | ZIP | 33160 | | - |
| NAME | <u>,</u> | | <u></u> | | | | | |
| ADDRESS | ······ | | STATE | | ZIP | | | |
| IN WITNES day of | S WHEREOF, the und | ersigned subsc | riber (s) ha - 2001 | | | 7 | (Seal) | ···· |
| | | • | | an. | v | | (Seal) | |
| | | | | and how | <u></u> | . == • . | | and a first fragment |
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| STATE OF | FLORIDA | · · · · · · · · · · · · · · · · |) SS | · · · · · · · · · · · · · · · · · · · | | <u>.</u> | | ta Tang ing |
| | OFMIAMI=DADE | |) | | • | • | | |
| before me, personally | a Notary Public autho appeared MAR | | UA & RII | A DIAS DE D | MORAES | | h above, | |
| | up bouge | 7 | <u>F</u> | <u>"L DL#P600-</u> | 540-74- Form of Ide | The second | | ें में दिस <u>्त्रे</u> |
| <u></u> | Sugnature Sugnature | | | TI. ID CARD# | | 4-69-82 | | · · · · · · · · · · · · · · · · · · · |
| <u></u> | Signature | | ······································ | · | Form of Ide | ntification | | |
| known to me au me that of the above na | nd known to be the person(s) THEY ex | ecuted these afficies | is of incorpora- | les of Incorporation, tion, that I relied upo n oath was not taken | who acknow in the form _ | ledged before | ication | |
| NOTATR | Y RUBBER STAMP SFAL | | Witness my ha | and and official seal | in the County | and State last | aforesaid this | |
| | | | 2 | 2.7 day of | JUNE | XX | 2001 | |
| | | . | | | | | | |

.....

Notary Signiture

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

BRAZ-USA FASHIONS, CORP.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at _____3660 NE_166 ST #414

| N. | MIAMI | BEACH, | FLORIDA | 33160 | | • | |
|-----------|-------|---------|---------|-------|--|---|--|
| has named | | INEZ PO | RRUA | _ | | | |

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position. I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)



FORM 215: CERTIFICATE & ACKNOWLEDGEMENT REGISTERED AGENT

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