## PO200058493

FILED SECRETARY OF STATE TALLAMASSEE, FLORIDA

02 MAY 28 PM 12: 28

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

(PROPOSED CORPORATE NAME - <u>MUST INCLUDE SUFFIX</u> )				
Enclosed is an origin	al and one(1) copy of the articl			9611 038004 *****78.75
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM		DALINIS rinted or typed)		
1024 ALTOOMA AVE				
SPRING HILL FL. 34609				
(352) 686 - 7604				
Daytime Telephone number				

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

SECRETARY OF STATE ARTICLES OF INCORPORATION® TALLAHASSEE, FLORIDA In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

02 MAY 28 PM 12: 29

NAME

The name of the corporation shall be:

ALFAROM INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1024 ALTOONA AVE, SPRING HILL 7-L 34609

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is:

IMPORT-EXPORT, TRADE AND SERVICES

SHARES

The number of shares of stock is:

1000 \$ our thousans shares of 1 dollar each

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

IONEL MAGDALINIS AVE, SPRINGHILL PL 34609 1024 ALTOONA PRESIDENT

REGISTERED AGENT

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

IONEL MAGDALINIS AVE, SPRING HILL FL 34609 1024 ALTOONA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

IONEL MAGDALINIS

1024 ALTOONA

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

05.21.02.

Signature/Incorporator