# Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346 FILED

02 JUN 17 AM 8: 14

SECRETARY OF STATE
ASSESSED TO RIGHT

# FLORIDA PROFIT CORPORATION OR P.A.

ALL INVESTMENT HOME AMERICAN CORP.

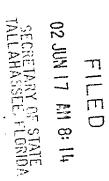
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#### ARTICLE OF INCORPORATION

<u>of</u>

ALL INVESTMENT HOME AMERICAN CORP.



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

#### ARTICLE I NAME

The name of the corporation shall be: ALL INVESTMENT HOME AMERICAN CORP.

The principal place of business of this corporation shall be: 8004 NW, 154 ST. # 366 MIAMI LAKES,FL. 33016

#### ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:  $100 \times $10.00 = $1,000.00$ 

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

## ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

ELADIO M. HERNANDEZ 14830 NW. 88 Ct. Miami Lakes,Fl.33016 DIRECTOR

#### ARTICLE VI INCORPORATOR(S)

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

ELADIO M. HERNANDEZ 14830 NW. 88 Ct. Miami Lakes,Fl.33016 PRESIDENT, SECRETARY & TREASURER

The undersigned has(have) exection this 17 th day of June	cuted these Article of Incorpora
	V 200
·	Signature/Title
	Signature/Title
	Signature/Title

02 JUN 17 AM 8: 15
SECRETARY OF STATE

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 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.

2.	The name and address of the registered agent and office
	isELADIO M. HERNANDEZ
	(Name)
	14830 NW. 88 CT. (P. O. BOX NOT ACCEPTABLE)
	Miami Lakes, Fl, 33016
	(CITY/STATE/ZIF)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT

DATE 06-17-2002