P020000 75426

TRANSMITTAL LETTER

02 JUL 11 AM 11:47

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

700006269147---9 -07/08/02--01019--004 ******78.75 ******78.75

SUBJECT:	(Proposed corpo	rate name - must include suffix	(i)
Enclosed is an original an \$70.00 Filing Fee	d one(1) copy of the arti \$78.75 Filing Fee & Certificate of Status	cles of incorporation and a \$1\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate

10556 N.W. 26th Street - Suite 203
Address

Miami, FL 33172

City, State & Zip

(305) 592-0663

Daytime Telephone number

Name (Printed or typed)

Orlando Arrom

FROM:

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

VI 7-11-02-5=

ARTICLES OF INCORPORATION

FILED

OF

02 JUL 11 AM 11:47

ALIFER ENTERPRISES, CORP.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

ALIFER ENTERPRISES, CORP.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers:

To have perpetual succession by its corporate name;

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of one hundred (100) shares, having an individual par value of one dollar (\$1.00).

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only (1) class of stock of this corporation.

ARTICLE V

The street address of the initial principal office and the name of the initial Resident Agent of this corporation shall be:

INITIAL PRINCIPAL OFFICE

3300 NE 191 Street, #1811 Aventura, FL 33180-2448

INITIAL RESIDENT AGENT

Orlando Arrom 10556 NW 26 Street, Suite 203 Miami, FL 33172

ARTICLE VI

The initial Board of Directors shall consist of a total of one (1) person, and the name and address of the persons who are to serve as initial directors are:

Fernando Yunis 3300 NE 191 Street, #1811 Aventura, FL 33180-2448 Director, President

Alicia Belacovsky 3300 N E 191 Street, #1811 Aventura, FL 33180-2448 Director, Vice-President and Secretary

The name and address of the incorporator executing these Articles of Incorporation is:

Fernando Yunis 3300 NE 191 Street, #1811 Aventura, FL 33180-2448

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 6th day of July, 2002.

STATE OF FLORIDA

COUNTY OF MIAMI DADE)

BEFORE ME, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared **Fernando Yunis** known to me and known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

SS.

<u>IN WITNESS WHEREOF</u>, I have hereunto set my hand and affixed my official seal in state and county aforesaid, this 6th day of July , 2002.

NOTÂRY PUBLIC, STATE OF FLORIDA

My Commission Expires:



CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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:
	Alifer Enterprises, Corp.
2.	The name and address of the registered agent and office is:
	Orlando Arrom
	(NAME)
	10556 NW 26 Street, Suite 203
	(P.O. BOX <u>NOT</u> ACCEPTABLE) Miami, FL 33172
	(CITY/STATE/ZIP)
PRO DES REG AGR THE FAM	ING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF CESS FOR THE ABOVE STATED CORPORATION AT THE PLACE IGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS ISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER EE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM ILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS ISTERED AGENT. SIGNATURE DATE DATE

PILL AMII: 47

SECRETARY OF STATE