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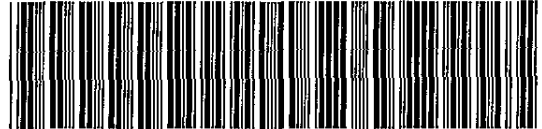
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STATE  
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EXPRESS CORPORATE FILING SERVICE INC.  
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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ALFE ENTERPRISES, INC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time ☒ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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Date NOVEMBER 13, 2002 2002 NOV 14 PM 1:36

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

STATE  
TALLAHASSEE FLORIDA

Re ALFE ENTERPRISES, INC, 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)

ALFE ENTERPRISES, INC.

(name of corporation)

MAILING ADDRESS OF CORPORATION

626 W. 36 ST

HIALEAH, FL 33012

PHONE

( 305 ) 558-7512

Area Code

Phone Number

Ext.

ARTICLES OF INCORPORATION

of

ALFE ENTERPRISES, INC.

(name of corporation)

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STATE  
TALLAHASSEE FLORIDA

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

ARTICLE I - CORPORATE NAME

The name of the corporation is:

ALFE ENTERPRISES, INC.

ARTICLE II - DURATION

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

ARTICLE III - PURPOSE

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

The corporation is authorized to issue FIVE HUNDRED shares ( 500 ) of ONE Dollar(s) (\$ 1.00 ) par. value Common Stock, which shall be designated "Common Shares".

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	ALFREDO A. FERREYRA		
ADDRESS	626 W. 36 ST		
CITY	HIALEAH	STATE	FL ZIP 33012

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

NAME	ALFE ENTERPRISES, INC.		
ADDRESS	626 W. 36 ST		
CITY	HIALEAH	STATE	FL ZIP 33012

ARTICLE VI - INITIAL BOARD OF DIRECTORS

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


NAME	ALFREDO A. FERREYRA	PRESIDENTE
ADDRESS	626 W. 36 ST	
CITY	HIALEAH	STATE FL ZIP 33012
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP

### Article VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:


NAME	ALFREDO A. FERREYRA				
ADDRESS	626 W. 36 ST				
CITY	HIALEAH	STATE	FL	ZIP	33012
NAME					
ADDRESS					
CITY		STATE		ZIP	
NAME					
ADDRESS					
CITY		STATE		ZIP	

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation this 13 day of NOVEMBER, ~~19~~ 2002

  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)

STATE OF FLORIDA )  
 ) SS  
 COUNTY OF MIAMI-DADE )

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared: ALFREDO A. FERREYRA

 _____ Signature	<u>FL DL#F660-001-71-202-0</u> _____ Form of Identification
_____ Signature	_____ Form of Identification
_____ Signature	_____ Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that HE executed these articles of Incorporation, that I relied upon the form \_\_\_\_\_ of identification of the above named person \_\_\_\_\_ as indicated opposite each name, and that an oath was not taken.

NOTATRY RUBBER STAMP SEAL

Witness my hand and official seal in the County and State last aforesaid this

13 day of NOVEMBER, ~~19~~ 2002

\_\_\_\_\_  
 Notary Signature

\_\_\_\_\_  
 Printed Notary Signature

**CERTIFICATE AND ACKNOWLEDGEMENT** **FILED**  
**OF REGISTERED AGENT**

2002 NOV 14 PM 1:36

**CERTIFICATE OF REGISTERED AGENT**  
**OF**

OFFICE OF THE SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ALFE ENTERPRISES, INC.

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*(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 626 W. 36 ST


HIALEAH, FLORIDA 33012

has named ALFREDO A. FERREYRA

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)*