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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

# HOF CORPORATION

#### FLORIDA PROFIT CORPORATION OR P.A.

PERFUMAX, INC

Certificate of Status	0
Certified Copy	1
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### ARTICLES OF INCORPORATION OF

#### PERFUMAX, INC

(name of corporation)

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

ARTICLE I-CORPORATE NAME

The name of the corporation is: PERFUMAX, 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 permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue <u>Five hundred shares</u> (500) of <u>five Dollar</u> (s) (\$5.00) 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 name of the at office is:

NAME	PERCY DESME			_
ADDRESS	2319 NW 20 STREET			
СПҮ	MIAMI	STATE	FL	ZIP 33142

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

NAME	PERCY DESME			-	
ADDRESS	2319 NW 20 STREET				
CITY	MIAMI	STATE	FL	ZIP 33142	$\neg$

#### ARTICLE VI-INITIAL BOARD OF DIRECTORS

This corporation shall have <u>FIVE</u> (5 director initially. The number of directors may be either increased or diminished from time to time by -laws, but shall never be less than one (1).

The name and addresses of the initial director (s) of the corporation are as followers:



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NAME	PERCY DESME				
ADDRESS"	15400 SW 99 LANE				
CITY	MIAMI	STATE	FLORIDA	ZIP	33196
NAME	HUGO DESME				
ADDRESS	15894 KILMARNOCK D				
CITY	MIAMI LAKES	STATE	FLORIDA	ZIP	33014
NAME	JORGE DESME		<u> </u>		
ADDRESS	13101 SW 85 STREET		,		
CITY	MIAMI	STATE	FLORIDA	ZIP	33183
NAME	CARLOS DESME				
ADDRESS	3667 SOUTH MIAMI A	VENUE APT	144		4
CITY	MIAMI	STATE	FLORIDA	ZIP	33133
NAME				-	
ADDRESS	1				,
CITY		STATE		ZIP	

#### ARTICLE VII - INCORPORATORS

The name and addresses of the incorporators signing theses Articles of Incorporation are as follows:

			7,		
NAME	PERCY DESME				
ADDRESS	15400 SW 99 LANE				
CITY	MIAMI	STATE	FLORIDA	ZJP	33196
NAME	HUGO DESME				
ADDRESS	15894 KILMARNOCK D	RIVE			
CITY	MJAMI LAKES	STATE	FLORIDA	ZIP	33014
NAME	JORGE DESME			········	
ADDRESS	13101 SW 85 STREET			<del></del>	
CITY	MIAMI	STATE	FLORIDA	ZIP	33183
NAME	CARLOS DESME		·		
ADDRESS	3667 SOUTH MIAMI AY	ENUE APT	144		
CITY	MIAMI	STATE	FLORIDA	ZIP	33133
NAME		·			· · · · · · · · · · · · · · · · · · ·
ADDRESS					
CITY		STATE	·	ZIP	
					<u> </u>

IN WITNESS WHERE OF, the undersigned subscriber (s) have executed these Articles of Incorporation this 13th day of January, 2003.

PREPARED: SOSA ACCOUNTING TAX SERVICE

570 EAST 49 STREET HIALEAH, FL 33013

(305) 688 – 1716 (305) 688 – 1714

(Seal)

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## CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

#### CERTIFICATE OF REGISTERED AGENT

**OF** 

#### PERFUMAX, INC.

(name of corporation)

Pursuant to Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation.

AT:

2319 NW 20 STREET

MIAMI, FL 33142

Has named

PERCY DESME

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

#### ACKNOWLEDGEMENT

Having bee named as Registered Agent to accept service of process for the above state 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 provisions of Florida Lawn in Keeping open said office.

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