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Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : SILVA'S ENTERPRISE, INC.

Account Number : 120020000100 Phone : (305)944-9755 Fax Number : (305)944-0955

FLORIDA PROFIT CORPORATION OR P.A.

ALLSHENEEDS, INC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

6/6/2003

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ARTICLES OF INCORPORATION

OF

ALLSHENEEDS, INC.

The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be: ALLSHENEEDS, INC.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, State of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation: 1111 KANE CONCOURSE - Suite 501 - Bay Harbor FL 33154.

The mailing address: 16300 NE 19 AVE. Suite C, North Miami Beach FL 33162.

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue is 1,000 shares common stock having an individual par value of \$ 1.00. Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

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ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be: Veronica Koren
1111 Kane Concourse, Suite 51
Bay Harbor FL 33154

ARTICLE VII

The name and address of the officers and initial board of directors shall be:

VERONICA KOREN
PRESIDENT / DIRECTOR

1111 Kane Concourse Suite 501 Bay Harbor FL 33154

ARTICLE VIII

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

Silva's Enterprise, Inc. 16300 NE 19 AVE. Suite C North Miami Beach, FL 33162

The undersigned will execute these Articles of incorporation the 06_day of June , 2003

INCORPORATOR
Fernando Silva Signing for
Silva's Enterprise, Inc.

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CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

SECKETARY OF STAIL TALL AHASSEF FI ORITA

ALLSHENEEDS, INC.
(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

NAME

VERDAJCA (LOREN)
Registered Agent