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To:

Division of Corporations

Fax Number : (850)205-0381

Account Name : HUBCO

Account Number : 104662003400

Phone : (516) 935-3940

Fax Number : (516)935-3088 __

FLORIDA PROFIT CORPORATION OR P.A.

BROCHE INC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

BROCHE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

BROCHE INC.

11751 SW 14 Street Miami, FL 33184

ARTICLE III_SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Nora Paredes 11751 SW 14 Street Miami, FL 33184

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940 S ON OR OF SIAIR

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Nora Paredes - President 11751 SW 14 Street Miami, FL 33184 Jorge Soler - Vice President 1611 Cortez Street Coral Gables, FL 33136 Luis Fernandez - Secretary 130 Shore Dr. West Miami, FL 33133

ARTICLES VI INCORPORATOR(S)

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

Nora Paredes 11751 SW 14 Street Miami, FL 33184

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

<u>12th</u> day of <u>August</u> 2003.

Nora Paredes - Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corpor	ation is: BROCHE INC.		 ·
2. The name and address of	the registered agent and office is:		03
	Nora Paredes	. <u>S</u>	AUG
	Name	· · _ · _ · _ · · · · · · · · · · ·	18 CE
	11751 SW 14 Street		
	(P.O. Box or Mail Drop Box NOT A	cceptable)	6
	Miami, FL 33184		- 55 - 55 - 55 - 55 - 55 - 55 - 55 - 55
	(City / State / Zip)		10

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Nora Paredes (Date)

Nora Paredes (Date)