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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAR 19 PM 1:43

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TRANSMITTAL LETTER

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

SUBJECT: SESIN INVESTMENT GROUP CORP.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: WIS E. SESIN

Name (Printed or typed)

8430 NW 83T APT B1

Address

MIAMI FL. 33126.

City, State & Zip

305 267 2590

Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

BESIN INVESTMENT GROUP CORP.

ARTICLE II PRINCIPAL OFFICE

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

8430 NW 8ST APT B1
MIAMI FL. 33126.

ARTICLE III SHARES

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

FIVE HUNDRED SHARES (500) OF ONE DOLLAR(S) (\$1.00)
PER SHARE COMMON STOCK, WHICH SHALL BE DESIGNATED
"COMMON SHARES".

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

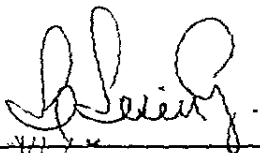
The name and Florida street address of the initial registered agent are:

LUIS E. BESIN 8430 NW 8ST APT B1
MIAMI FL. 33126.

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

LUIS E. BESIN 8430 NW 8ST APT B1
MIAMI FL. 33126



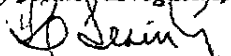
Signature/Incorporator.

3-15-2004

Date

(An additional article must be added if an effective date is requested.)

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 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/Registered Agent

1-8-2004

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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