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CORPORATION NAME(S) & DOC	UMENT NUMBER(S) (if known):	
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(Corporation Name)	(Document #)	
2. (Corporation Name)	(Document #)	
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	Trademark	

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Examiner's Initials

## ARTICLES OF INCORPORATION OF

Sirvanti Menswear, Inc



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

#### ARTICLE I

The name of the corporation shall be:

Sirvanti Menswear, Inc.

#### **ARTICLE II**

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

5744 S.W. 72<sup>nd</sup> Street South Miami, Fl 33143

#### **ARTICLE III**

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

500 shares (five hundred) @ \$ 1.00 (one dollar)

#### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Giuseppe Villella 5744 S.W. 72<sup>nd</sup> Street South Miami, Fl 33143

### ARTICLE V INCORPORATOR (S)

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

Giuseppe Villella, President 5744 S.W. 72<sup>nd</sup> Street South Miami, FI 33143

The undersigned has(have) executed these Articles of Incorporation this 2nd day of April, 2004.

Signature/ Title

#### CERTIFICATE OF DESIGNATION

#### REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Status, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation is: Sirvanti Menswear, Inc.
- 2. The name and address of the registered agent and office is:

Giuseppe Villella 5744 S.W. 72<sup>nd</sup> Street South Miami, FI 33143

itle\_\_\_PRESID

Date 04/05/04

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ECRETARY OF STATE

LLAHASSEE, FLORIDA

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFIED, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL MY STATUS RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Signature/

Date 04/05