

P05000/42859

Alberto PARMA

(Requestor's Name)

6073 NW 167 St.

(Address)

#C7

(Address)

Miami FL 33015

(City/State/Zip/Phone #)

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FILED
SECRETARY OF STATE
TALLAHASSEE, FL 32304
05 OCT 20 AM 11:31

MRS
10/21

**ARTICLES OF CORPORATION
OF
ALPARMA CORP.**

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 OCT 20 AM 11:31

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

ARTICLE I NAME

The name of the corporation shall be: **ALPARMA CORP.**

The principal place of business of this corporation shall be:

6073 NW 167 ST #C 7
MIAMI FL 33015

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities Or business permitted under the laws of the United States, The State of Florida, Or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this Corporation is authorized to have outstanding at any one time is:

100 X \$10.000 = \$1.000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS, DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall Hold office the first year of the corporation's existence or until their Successor(s) is (are) elected, is (are):

ALBERTO PARMA

6073 NW 167 ST #C 7
MIAMI FL 33015

ARTICLE IV INCORPORATOR(S)

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

ALBERTO PARMA

6073 NW 167 ST # C 7
MIAMI FL 33015

The undersigned has (have) executed these Articles of Incorporation
This 17TH day of OCTOBER 2005



Signature/Title (PRESIDENT)

Signature/Title

Signature/Title

CERTIFICATE OF DESIGNATION

REGISTERED AGENT / REGISTERED OFFICE

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 OCT 20 AM 11:31

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes,
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: ALPARMA CORP.
2. The name and address of the registered agent and office is:

ALBERTO PARMA
Name

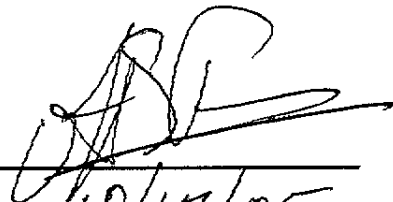
6073 NW 167 ST # C7
(P.O. Box not acceptable)

MIAMI FL 33015
City/State/Zip

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE
OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE
DECI 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

DATE


10/17/05