

Florida Department of State

Division of Corporations Public Access System

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SECRETARY OF STATE A

To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT/NON PROFIT CORPORATION

STATE FINANCIAL INVESTMENTS, CORP.

D. WHITE FEB 2 7 2006

Certificate of Status	0
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P6-EEB 24 AH 10: 22 TALLAH SSEEL FLORIDA

ARTICLES OF INCORPORATION

OF

STATE FINANCIAL INVESTMENTS, CORP.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

ARTICLE I

The name of the corporation shall be:

STATE FINANCIAL INVESTMENTS, CORP.

ARTICLE II

This corporation shall commence existence upon the filling of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do may and all of the things herein mentioned, us fully and to the same extent as natural persons might do, viz:

- 1) Transact any and all lawful business
- 2) Said corporation shall further have powers
- To have perpetual succession by it's corporate

Name:

STATE FINANCIAL INVESTMENTS, CORP.

ARTICLE IV

The aggregate number of shares, which the corporation shall have authority to issue, is the total sum of 1000 shares, having an individual per value of \$10.00

Unless otherwise stated in this article, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

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ARTICLE V

The street of the initial registered office and the name of the initial Registered Agent of this corporation shall be:

ALEIDO E. PEREZ 3855 SW 137th Avenue Suite: 12 Miami, Florida 33175

The principal office shall be:

3855 SW 137th Avenue Suite: 12 Mlami, Florida 33175

ARTICLE VI

The initial Board of Directors shall consist of a total of TWO (2) person, and the name and address of the person who is to serve as an initial director is:

ALEIDO E. PEREZ 3855 SW 137th Avenue Suite: 12 Miami, Florida 33175 PRESIDENT/TREASURE

EDGARD E. BRAVO 3853 SW 137th Avenue Suite: 12 Miami, Florida 33175 VICE-PRESIDENT/SECRETARY

The shares of each shareholders and registered agent to the Certificate of Incorporation are as follows:

ALEIDO E. PEREZ 3855 SW 137th Avenue Suite: 12 Miami, Florida 33175 50%

EDGARD E. BRAVO 3855 SW 137th Avenue Suite: 12 Miami, Florida 33175 50%

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

ALEIDO E. PEREZ 3855 SW 137th Avenue Suite: 12 Miami, Florida 33175

EDGARD E. BRAVO 3855 SW 137th Avenue Suite: 12 Miami, Florida 33175

IN WITNESS WHEREOF, the undersigned incorporator has we executed theses

Articles of Incorporation this 13th day of February 2006. -

METO E. PEREZ

Pyesident

EDGARD E. BRAVO Vice-President

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision 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:

STATE FINANCIAL INVESTMENTS, CORP.

2. - The name and address of the registered agent and office is:

ALEIDO E. PEREZ 3855 SW 137th Avenue Suite: 12 Miami, Florida 33175

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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 a registered agent.

Signature:

SECRETARY OF STATE

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