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Fax Number : (850)205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
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FLORIDA PROFIT/NON PROFIT CORPORATION

ARVEN TRADING, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

3-8-06

ARTICLES OF INCORPORATION

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

ARTICLE I

The initial name and address of this corporation shall be:

ARVEN TRADING, INC.

8425 NW 68 ST
MIAMI, FL 33166

ARTICLE II

This corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE III

The capital stock authorized, the par value thereof, and the characteristics of such stock shall be as follows:

<u>Number of Shares Authorized</u>	<u>Par Value Per Share</u>	<u>Class of Stock</u>
500	\$1.00	Common

ARTICLE IV

The name and address of the initial registered agent is:

SARAI TORREALBA
5843 NW 111 AVENUE
DORAL, FL 33178

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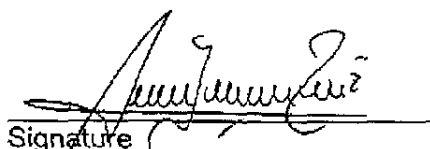
ARTICLE V

The name and street address of the incorporator to this Articles of Incorporation is:

SARAI TORREALBA – Director

5843 NW 111 AVENUE
DORAL, FL 33178

The undersigned incorporator have executed these Articles of Incorporation
this 4th day of March, 2006.


Signature

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CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:

ARVEN TRADING, INC.

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

SARAI TORREALBA
5843 NW 111 AVENUE
DORAL, FL 33178

Signature

Title

Date

Sarai Torrealba

DIRECTOR

March 4th 2006

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES 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

Sarai Torrealba

March 4th 2006

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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