

Florida Department of State

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To:

Division of Corporations

Fax Number

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From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

Phone

: (305)599-0839

Fax Number

: (305)716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

OMNI BAKERY OF FLORIDA, INC.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF

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:

OMNI BAKERY OF FLORIDA, INC.

The principal place of business of this corporation shall be:

12930 NE 8 AVENUE NORTH MIAMI, FL 33161

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 value this corporation is authorized to have outstanding at any one time is: 1000 shares.

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) and director(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):

RONEL SAINT-JEAN 1271 NE 161 STREET NORTH MIAMI BEACH, FL 33162

PRESIDENT

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is (are):

RONEL SAINT-JEAN 1271 NE 161 STREET NORTH MIAMI BEACH, FL 33162

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 7^{TR} day of August, 2006.

Signature(s) of Incorporator

<u>CERTIFICATE OF DESIGNATION</u> 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:

OMNI BAKERY OF FLORIDA, INC.

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SECHETARY OF STATE TALLAHASSEE, FLORIDA

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

RONEL SAINT-JEAN

(P O BOX NOT ACCEPTABLE) 1271 NE 161 STREET NORTH MIAMI BEACH, FL 33162

(CITY/STATE/ZIP)

Signature

Title President

Date _____August 7, 2006

HAVING BEEN NAMED TO ACCEPT 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

August 7, 2006