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*Signature*

To:

Division of Corporations  
Fax Number : (850) 205-0381

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

ALEXANDER 16, INC.

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ARTICLES OF INCORPORATION  
OF

**ALEXANDER 16, INC.**

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

ARTICLE I NAME

The name of the corporation shall be:

**ALEXANDER 16, INC.**

The principal place of business of this corporation shall be:

**21164 SW 112 AVE, APT 205  
MIAMI, FL 33189**

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 that this corporation is authorized to have outstanding at any one time is:

**100 SHARES AT (\$10.00) PER VALUE**

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name and street address of the initial officer and director if any, who shall hold office the first year of the corporation's existence or until their successor is elected, is:

**MAYRA SANCHEZ  
21164 SW 112 AVE, APT 205  
MIAMI, FL 33189**

**ARTICLE VI INCORPORATOR(S)**

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

**MAYRA SANCHEZ  
P/V/T/S/RA  
21164 SW 112 Ave, Apt 205  
Miami, FL 33189**

**IN WITNESS WHERE OF**, the undersigned incorporator (s) has (have) executed these Articles of incorporation this 25th day of September, 2006.

Signature of Incorporator

  
\_\_\_\_\_  
Mayra Sanchez / P/V/T/S/RA

**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:  
ALEXANDER 16, INC. 21164 SW 112 AVE. APT 205 MIAMI, FL 33189.
2. The name and address of the registered agent and office is:  
MAYRA SANCHEZ, 21164 SW 112 AVE. APT 205, MIAMI, FL 33189.

SIGNATURE: \_\_\_\_\_



TITLE: P/V/T/S/RA

DATE: September 25, 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: September 25, 2006

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