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To:

Division of Corporations Division of Corporactions
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

#### **FACCHINI INC**

| Certificate of Status | 0       |
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| Certified Copy        | 1       |
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12/7/2006

# ARTICLES OF INCORPORATION OF

FACCHINI INC

FILED

06 DEC -7 AN II: 47

SECRETARY OF STATE
TALLAPASSEE, PLORIDA

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:

FACCHINI INC

The principal place of business of this corporation shall be:

6831 NW 107 Ct Doral F1 33178

#### 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 \$5.00 Par Value

#### 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):

Giancarlo Facchini 6831 NW 107 Ct Doral F1 33178

Angela Acevedo 6831 NW 107 Ct Doral Fl 33178

## ARTICLE VI\_INCORPORATOR(S)

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

Giancarlo Facchini 6831 NW 107 Ct Doral F1 33178

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this

Signature(s) of Incorporator (s)

FILED

06 DEC -7 AN 11: 47

## **CERTIFICATE OF DESIGNATION** CERTIFICATE OF DESIGNATION SECRETARY OF STATE REGISTERED AGENT/ REGISTERED OFFICE ALLAHASSES, FLORIDA

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:   |   |
|---|---|
| FACCHINI INC  |   |
| 2. The name and address of the register   | ered agent and office is :  |
| 6831 NW 107 Ct  | _// //  |
| Doral Fl 33178  | ( ) Level of A  |
|   | Signature filling   |
| ן   | itle President Date 12-07-06  |
| THE ABOVE STATED CORPORATION THIS CERTIFICATE, CAPACITY, AND I FURTH PROVISIONS OF ALL STATUTE COMPLETE PERFORMANCE C | CCEPT SERVICE OF PROCESS FOR TON, AT THE PLACE DESIGNATED I HEREBY AGREE TO ACT IN THIS ER AGREE TO COMPLY WITH THE S RELATIVE TO THE PROPER AND F MY DUTIES, AND LACCEPT THE ONS OF SECTION 607.325, FLORIDA STATUTES.  Signature  Date 12-07-06 |