# J07000049048

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
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| (Address)                               |  |  |  |  |
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
| (1-22-22)                               |  |  |  |  |
|   |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (During Fally Many)                     |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| •                                       |  |  |  |  |
| (Document Number)                       |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
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| <u></u>                                 |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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Office Use Only

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#### COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

| SUBJECT: Silve          | er World Internationa               | ıl, Inc.                   |                                    |  |
|-------------------------|-------------------------------------|----------------------------|------------------------------------|--|
|                         | (PROPOSED CORPORA                   | TE NAME – <u>MUST INCL</u> | UDE SUFFIX)                        |  |
|                         | •                                   |                            |                                    |  |
|                         |                                     |                            |                                    |  |
| Enclosed are an orig    | ginal and one (1) copy of the artic | cles of incorporation and  | d a check for:                     |  |
|                         | g (1) 00p) 01                       |                            |                                    |  |
| \$70.00                 | \$78.75                             | \$78.75                    | \$87.50                            |  |
| Filing Fee              | Filing Fee                          | Filing Fee                 | Filing Fee,                        |  |
| -                       | & Certificate of Status             | & Certified Copy           | Certified Copy<br>& Certificate of |  |
|                         |                                     |                            | Status                             |  |
|                         | ,                                   | ADDITIONAL CO              | PY REQUIRED                        |  |
|                         |                                     |                            |                                    |  |
|                         |                                     |                            |                                    |  |
| _                       |                                     |                            |                                    |  |
| FROM: S                 | arah Gibson on behalf o             |                            | , Inc.                             |  |
| Name (Printed or typed) |                                     |                            |                                    |  |
|                         | 0455 5 5 4 1 1 4                    | 04 4                       |                                    |  |
|                         | 3155 E. Patrick Lane,               | Ste. 1                     |                                    |  |
|                         | A                                   | Address                    |                                    |  |
|                         | 1 1/ NB/ 00400                      |                            |                                    |  |
|                         | Las Vegas, NV 89120                 | State & Zip                |                                    |  |
|                         | City,                               | ounce & Zip                |                                    |  |
| , i magaza              | (702) 866-2500                      |                            |                                    |  |
|                         | <del></del>                         | elephone number            |                                    |  |

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

Silver World International, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

19101 Mystic Pointe Dr. 1109, Aventura, FL 33180

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any legal purpose

## ARTICLE IV SHARES

The number of shares of stock is:

1,500

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

President/Director- Luiz Silver

19101 Mystic Pointe Dr. 1109

Aventura, FL 33180

Secretary/Treasurer- Glaucia Betesh
19101 Mystic Pointe Dr. 1109, Aventura, FL 33180

# <u>ARTICLE VI REGISTERED AGENT</u>

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

Incorp Services, Inc. 17888 67th Court North Loxahatchee, FL 33470

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Luiz Silver

19101 Mystic Pointe Dr. 1109

Aventura, FL 33180

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature Registered Argent January Sturres/ne 4/17/00

Signature/Incorporator

04/12/2007

Date