Florida Department of State

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Division of Corporations

Fax Number : (850) 205-0381

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

(305) 634-3694

Fax Number

: (305)633-9696

FLORIDA PROFIT/NON PROFIT CORPORATION

alliance financial solutions, inc.

Certificate of Status	******	بمنجابه	0	
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CERTIFICATE OF INCORPORATION

ARTICLES OF INCORPORATION FOR

ALLIANCE FINANCIAL SOLUTIONS, INC.

We the undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation privileges, and immunities of a corporation for profit, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

ALLIANCE FINANCIAL SOLUTIONS, INC.

ARTICLE II

The cotposation may engage in any activity of business permitted under the laws of the United States of America.

ARTICLE III

The corporation is authorized to issue one hundred (100) shares of \$10.00 par value Common Stock, which shall be designated "Common Shares" shares of Common Stock by both the president and vice-president. Stocks will have no value if not signed by the president and vice-president.

ARTICLE IV

The amount of capital with which this corporation will begin business shall not be less than one Thousand (\$1000.00) dollars.

Prepated by: Metcy Valle Vares Inc. 1688 Cotal Way Miami Fl. 33145 Tel: 305-285-8868 Pax: 305-285-2886

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ARTICLE V

This corporation is to have perpetual existence.

ARTICLE VI

The principal office of this corporation shall be:

10230 SW 32ND STREET MIAMI, FL 33165

ARTICLE VII

The number of the Board of Directors of the Corporation shall not be less than one person. The names and post office addresses of the First Board of Directors, who subject to the provisions of the Certificate of Incorporation, the By-laws and the Acts of Legislature, shall hold office for the Corporation, are:

SARA LEAL 10230 SW 32^{NO} STREET MIAMI, FL 33165

PRESIDENT

LAZARO LEAL 10230 SW 32ND STREET MIAMI, FL 33165

VICE-PRESIDENT

The Board of Directors will be able to utilize all powers granted them by law in order to direct the Corporation as they see lit.

ARTICLE VIII

The names and post office addresses of each shareholder to the Certificate of Incorporation slash incorporator are as follows:

SLASH-INCORPORATE SHAREHOLDERS

% OF SHARES

SARA LEAL 10230 SW 32ND STREET MIAMI, FL 33165 50%

LARARO LEAL 10230 SW 32ND STREET MIAMI, FL 33165 50%

ARTICLE IX

The corporation shall have the right and power to, from time to time, determine whether and to what extent, at what time and places and under what conditions and regulations the accounting books of this Corporation, other than the stock book, or any of them, shall be open to the inspection of the stockholders, and no stockholders shall have any right of inspections of any account book or document of this Corporation, except as conferred by statute, unless authorized by resolution of the stockholders or Board of Directors. The Corporation, in it's By-laws confers power upon it's Board of Directors or Officers, in addition to the foregoing and in addition to the powers authorized and expressly conferred by Statute.

The corporation reserves the rights to amend, alter, change or repeal any provisions contained in this Certificate of Incorporation in the manner now hereafter prescribed by statute, and all rights conferred upon the stockholders herein or granted subject to this reservation.

We, the undersigned, being each and all of the original subscribers to the capital stock herein above named for the purpose of forming a corporation for profit to do business, both within and without the State of Florida, do hereby declaring and certifying that the facts herein stated are true, and so respectively agree to abide by the Articles as herein stated.

Subscribed at Miami, Dade County, Florida, this 30FH day of July of the year 2007.

SARA LEAL PRESIDENT

LAZARO LEAL VICE-PRESIDENT STATE OF FLORIDA)

SS
COUNTY OF MIAMI-DADE)

Before me, the undersigned authority, duly authorized to administer oaths and receive acknowledgments, personally appeared

SARA LEAL & LAZARO LEAL

Who, after being duly swom by me, depose and say that he signed the above and foregoing Certificate of Incorporation for the purposes therein set forth.

WITNESS my hand and official seal, at Miami, Dade County, Florida, this 30TH day of July of the year 2007

ARACELI M. VALLE Notary Public, State of Florida at Large

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CERTIFICATE OF ACKNOWLEDGMENT OF REGISTERED AGENT FOR SERVICE AND PROCESS WITHIN THE STATE OF FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

That: ALLIANCE FINANCIAL SOLUTIONS, INC.

Is qualified to do business under the laws of the State of Florida, with its REGISTERED OFFICE at:

10230 SW 32ND ST MIAMI, FL 33165

And has appointed: SARA LEAL

As it's agent to accept services of process within the State.

ACKNOWLEDGMENT

Having been named as Registered Agent to accept service of process for the above stated Corporation at the place designated in the Certificate. I hereby accept to act in this capacity and agree to comply with the provisions of said Act relative to keeping office suid office.

SARA LEAL, Registered Agent

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