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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. FAIRMANAT INC	
(Corporation Name)	(Document #)
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(Corporation Name)	(Document #)
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NEW FILINGS	AMENDMENTS
Profit	Amendment
Not for Profit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	
	Merger *
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	- Foreign
Fictitious Name	Limited Partnership
	Reinstatement
	L Trademark
•	U Other
	Examiner's Initials

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ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I – NAME

The name of the corporation shall be:

Farmanat Inc

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

24195W 275T suite 101 Miam! Fl 33133

ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: Lissete Gonzalez

2419 SW 275T Suite 101 Miami FI 33133

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ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Lissete González Yoel Lemas 2419 SW 27 ST aption Miami FI 33133

The undersigned incorporator has executed these Articles of

Incorporation this

, i

day of 2007 Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Lissete Gonzalez Presidente Yoel Lemas Vicepresidente

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature