

## Florida Department of State Division of Corporations

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### FLORIDA PROFIT/NON PROFIT CORPORATION

Saphire Investment Group, Inc.

Certificate of Status	1
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12/10/2008

#### 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:

Saphire Investment Group, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Saphire Investment Group, Inc. 8921 Starhaven Cove Boynton Beach, FL 33473

ARTICLE III SHARES

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

1,500 Shares at no Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Rafael Fis 8921 Starbaven Cove Boynton Beach, FL 33473

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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#### ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

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

Rafael Fis - President/Director 8921 Starhaven Cove Boynton Heach, FL 33473

#### ARTICLES VI INCORPORATOR(S)

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

Rafael Fis 8921 Starbaven Cove Boyuton Beach, FL 33473

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

10th day of December 2008.

Raiael Fis - Signature

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Saphire Investment Group, Inc.	<u>,</u>
2. The name and address of the regist	ered agent and office is:	
	Rafael Fis	
	Name	
	8921 Starhaven Cove	
	(P.O. Box or Mail Drop Box NOT Acceptable)	
	Boynton Beach, FL 33473	
•	(City / State / Zip)	

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Refect Fis (Date)

SIGNATURE

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