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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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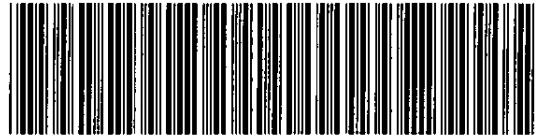
(Business Entity Name)

(Document Number)

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2009 FEB 12 PM 4:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: SEFA IMPORTS, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: SANDRA AND FAUSTO TERSIGNI

Name (Printed or typed)

1922 CORAL HEIGHTS COURT

Address

FORT LAUDERDALE, FL 33308

City, State & Zip

954-632-0289

Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

ŞEFA IMPORTS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1922 CORAL HEIGHTS COURT
FORT LAUDERDALE, FLORIDA 33308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SANDRA TERSIGNI, PRESIDENT
FAUSTO TERSIGNI, VICE-PRESIDENT

1922 CORAL HEIGHTS COURT
FORT LAUDERDALE, FLORIDA 33308

ARTICLE VI REGISTERED AGENT

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

1922 CORAL HEIGHTS COURT
FORT LAUDERDALE, FLORIDA 33308

SANDRA TERSIGNI

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SANDRA TERSIGNI
1922 CORAL HEIGHTS COURT
FORT LAUDERDALE, FLORIDA 33308

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

Sandra Tersigni

Signature/Registered Agent

02/03/09

Date

Sandra Tersigni

Signature/Incorporator

02/03/09

Date

SANDRA TERSIGNI