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OMNI BUSINESS SERVICES, INC

DBA OMNI INSURANCE SERVICES, INC 2413 BISCAYNE BLVD MIAMI, FL 33137 TEL:305-576-7755 FAX:305-576-8961

February 20, 2012

Florida Department of State Division of Corporation P O BOX 6327 Tallahassee, Florida 32314

Dear Sir or Madam:

Enclosed you will find the Articles of Incorporation of CHERFILS ENTERPRISES, INC, along with a Money Order in the amount of \$ 78.75. Please register it for me.

Thanking you for your courtesy, I remain.....

Sincerely Yours

Emmanuel Regis

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

OF

12 FEB 23 PM 12: 54

CHERFILS ENTERPRISES, INC

The undersigned incorporator hereby make, subscribe, acknowledge and file with the Department of State these Articles for the purpose of forming a Corporation for Profit in accordance with the Laws of the State of Florida.

ARTICLE I-NAME:

The name of this Corporation shall be:

CHERFILS ENTERPRISES, INC

ARTICLE II- GENERAL NATURE OF BUSINESS:

This Corporation may engage in activity or business permitted under the Laws of the United States of America, and the State of Florida.

ARTICLE III-CAPITAL STOCK;

The maximum number of shares which the Corporation shall have authority to issue is the total sum of

SHARES PAR VALUE

100,000 \$1.00

Which shall be designated "Common Shares", each of said shares of stock shall entitle the holder thereof to one (1) vote at any meeting of the stockholders. All or any part of said capital stock may be paid in cash, in property (other than stock or securities) or in labor or services at a fair valuation to be fixed by the incorporator or by the Board of Directors at a meeting called for such purpose. All stock when issued shall be fully paid for and shall be non-assessable.

ARTICLE IV-TERM OF CORPORATE EXISTENCE:

The Corporation shall have perpetual existence

ARTICLE V-INITIAL REGISTERED OFFICE AND INITIAL AGENT/PRINCIPAL ADDRESS

ADDRESS OF OFFICE

AGENT AT SUCH ADDRESS

71 NW 189th STREET MIAMI, FL 33169

NIXON CHERFILS

*******THE MAILING ADDRESS******

P.O. BOX 640006 MIAMI, FLORIDA 33164-0006

ARTICLE VI-DIRECTOR(S)

The Corporation shall have a minimum of one (1) Director. The number of Directors may be increased from time to time by Amendment of By-Laws:

ARTICLE VII-INITIAL BOARD OF DIRECTORS IS/ ARE;

DIRECTOR (S)

ADDRESS

NIXON CHERFILS

71 NW 189th STREET MIAMI, FL 33169

The member (s) of the first board of Director, unless otherwise provided by the By-laws hold office for the first year of the existence or until their successors are selected or appointed and qualified.

ARTICLE VIII:

SUBSCRIBER (S)

NAME

ADDRESS

NUMBER OF SHARES

NIXON CHERFILS

71 NW 189th STREET MIAMI, FL 33169

80,000 SHARES

ARTICLE IX-OFFICERS:

The officer of this Corporation shall be a President who shall be a Director, a Secretary and a Treasurer and such Officer, Agent and factor as may deemed necessary.

OFFICERS	TITLE	ADDRESS
NIXON CHERFILS "	PRESIDENT	71 NW 189 th STREET MIAMI, FL 33169
NIXON CHERFILS	TREASURER	71 NW 189th STREET MIAMI, FL 33169
NIXON CHERFILS	SECRETARY	71 NW 189 th STREET MIAMI, FL 33169

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ARTICLE X-AMENDEMENT:

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation in the manner now or hereafter prescribed by the laws of the State of Florida and all rights conferred upon stockholder herein after are

subject to this reservation. IN WITNESS WHEREOF, the undersigned in	ncorporator (s) have executed these Articles
	ay of Bebruary 2012
Signature (s) of Incorporator (s)	
The state of the s	
NIXON CHERFILS / PRESIDENT	
NIXON CHERFILS / TREASURER	
and the same of th	
NIXON CHERFILS / SECRETARY	
State of Florida	
County of Miami-Dade	and a
The foregoing instrument was acknowledged	before me this 20 Day
of <u>Feb</u> 2012	•
Notary Signature	My Commission Ex EMMANUEL REGIS MY COMMISSION # DD 861236 EXPIRES: April 14, 2013 Sonded This Metary Public Lindonsities

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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CERTIFICATE DESIGNATED REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the prevention of section 607.325, Florida Statutes, the undersigned Corporation organized under the Laws of the State of Florida, submits the following statement designating the registered agent in the State of Florida.

1- The name of the Corporation is: CHERFILS ENTERPRISES, INC

P.O. BOX 640006

2-The name and address of the registered agent is NIXON CHERFILS 71 NW 189th STREET MIAMI, FLORIDA 33169

THE MAILING ADDRESS OF THIS CORPORATION IS*

MIAMI, FLORIDA 33164 - 0006

Date: 02-20-2011

Signature Corporate Officer

Having been named to accept service of process for the above stated Corporation, at the place designated, I hereby agree to act in this capacity, and I further agree to comply with the provision of statutes, relative to the proper and complete performance of my duties and I accept duties, and obligations of section 607.325 Florida Statutes.

Date: 02-20-2012

I hereby certify that on this Day before me, a Notary Public duly authorized in the State and County named above to take acknowledgments personally appeared:

Name: NIXON CHERFILS known to be the person described and registered agent.

State of Florida

County of Miami-Dade

The foregoing instrument was acknowledged and sworn to before me this <u>Sl</u> of February 2012

is 20⁷⁷D

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Notary Signature

My Commission Expire

