#0408 P.001/004

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annu	Address:  FLORIDA PROFIT/NON PROFIT CORPORATION		SECRETARY 1	12 NOV 12
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## ARTICLES OF INCORPORATION OF

The undersigned incorporator(s), for the purpose of forming a Professional Service Corporation under Chapter 621 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation

### ARTICLE I NAME

The name of the corporation shall be:

ALIX NICOLE, INC.

### ARTICLE II PRINCIPAL OFFICE

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

8323 NW 12 STREET, SUITE 210 -- DORAL, FL 33126---

#### ARTICLE III PURPOSE

The purpose of this corporation shall be:

WHOLESALE/MANUFACTURING

#### ARTICLE IV CAPITAL STOCK

The number of shares of stock that this corporation is authorize to have outstanding is:

100

### ARTICLE V INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

CESAR J. ALVAREZ 8323 NW 12 STREET, SUITE 210 DORAL, FL 33126 SECRETATION OF STATE

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### ARTICLE VI BOARD OF DIRECTOR (S)

The name and address of the initial board of director(s) shall be:

CESAR J. ALVAREZ - PRESIDENT/TREASURER

ALEXANDRA N. ALVAREZ - VICE PRESIDENT / SECRETARY

8323 NW 12 STREET, SUITE 210 DORAL, FL 33126

### ARTICLE VII OFFICER (S)

The name, title and address of the officer(s) of this corporation shall be:

CESAR J. ALVAREZ - PRESIDENT/TREASURER

ALEXANDRA N. ALVAREZ - VICE PRESIDENT / SECRETARY ....

8323 NW 12 STREET, SUITE 210 DORAL, FL 33126

#### ARTICLE VIII INCORPORATOR (S)

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

CESAR J. ALVAREZ 8323 NW 12 STREET, SUITE 210 DORAL, FL 33126

The undersigned has (have) executed these Articles of Incorporation this 15th day of november . 20 1a.

Incorporator Signature

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERD OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTTES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE

12 NOV 16 AN IO: 10 SECRETARY OF STATE PALLAHASSEE FLORIES