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FLORIDA PROFITANON PROFIT CORPORATION KIAN FASHIONS, INC.

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ARTICLES OF INCORPORATION OF

KIAN FASHIONS, INC.

The undersigned incorporator, for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopts the following Article of Incorporation.

ARTICLE I

The name of this corporation shall be: KIAN FASHION, INC.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation is:

2094 S.W. 158TH AVENUE, MIRAMAR, FL 33027

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue is 1,000 shares having an individual par value of \$1.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one class (1) class of stock of this corporation.

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ARTICLE VI

The name and street address of the mitial Registered Agent of the corporation shall be:

SANAKAUSAR SHAMII 2094 S.W. 158TH AVENUB MIRAMAR, FL 33027

ARTICLE VII

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

SANAKAUSAR SHAMII PRESIDENT, DIRECTOR 2094 S.W. 158th Avenue Miramar, FL 33027

ARTICLE VIII

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

SANAKAUSAR SHAMJI 2094 S.W. 158TM AVENUR MRAMAR, 33027

The undersigned has executed these Articles of Incorporation this 6rd day of May 6, 2013

Jana Incorporator Signature

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

KIAN FASHIONS, INC. (Name of Corporation)

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 RECISTERED AGENT 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 DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLICATIONS OF MY POSITION AS REGISTERED AGENT

Signature:

Registered Agent

SANAKAUSAR SHAMJI

ADDRESS:

CITY OF: MIAMI COUNTY OF:

BROWARD

STATE OF:

FLORIDA

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