ENTE COM FORAT I 12:49 AM 0 ACCESS SYSTEM ELECTRONIC FILING COVER SHEET DIVISION OF CORPORATIONS FROM: FAS-T CORP. AGENTS, INC. DEPARTMENT OF STATE 8405 NW 53RD ST STATE OF FLORIDA SUITE C-100 409 EAST GAINES STREET MIAMI FL 33166-CONTACT: LIDIA TALLAHABBEE, FL 32399 FERNANDEZ PHONE: (305) 599-0839 FAX: (904) 922-4000 FAX: (305) 592-9591 (((H96000000114))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A. NAME: TOKAY GROUP, INC. FAX AUDIT NUMBER: H96000000114 CURRENT STATUS: REQUESTED TIME REQUESTED: 12:49:49 DATE REQUESTED: 01/03/1996 CERTIFIED COPIES: 0 CERTIFICATE OF STATUS: 1 NUMBER OF PAGES: 3 METHOD OF DELIVERY: FAX ACCOUNT NUMBER: 071001002335 ESTIMATED CHARGE: \$78.75 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H96000000114))) \*\* ENTER 'M' FOR MENU. \*\* FLORIDA DIVISION OF CORPORATIONS 1/03/96 12:50 AM

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ARTICLES OF INCORPORATION

QΕ

TOKAY GROUP, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

## ARTICLE L. NAME

The name of the corporation shall be:

TOKAY GROUP, INC.

The principal place of business of this corporation shall be: 18090 Collins Ave # T-4

North Miami Beach, Fl 33160

## <u>ARTICLE II. NATURE OF BUSINESS</u>

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE III ... **CAPITAL STOCK**

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 100 Shares

## ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

V/President:

Marcelo Eugenio Faure

18090 Collins Ave # T-4

V/President:

Ruben Cesar Schneir

North Miami Beach, Fl 33160 18090 Collins Ave. # T-4 North Miami Beach, Fl 33160

Prepared by: Ruben Cesar Schneir

18090 Collins Ave. # T-4 North Miami Beach, Fl 33160

(305) 949-4239

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## ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the inco	orporator(s) to this articles of incorpora-
tion is(are):	•

Ruben Cesar Schneir

18090 Collins Ave. # T-4 North Miami Beach, Fl 33160

N WITNESS WHEREOF, the unders	igned incorporator(s) has(have) executed these  day of <u>Jenuary</u> , 1976
	Signature(a) of Incorporator(s)
·	
BTATE OF FLORIDA COUNTY OF Dade	
THE FOREGOING instrument was ac day of January , 19 96 by Ruben	knowledged and sworn to before me this 3rd Cesar Schneir (F1 driver's license S560-723-54-269 (Name of incorporator)
of Tokay Group, (Name of Corpo	Notary Public HOTAN PUBLIC STATE OF 1,080A NO CC346068
	My Commission Expires:

(SEAL)

ARTICLES OF INCORPORATION FILING FEE:

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# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607,325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

٦,	ne name of the corporation is: lokay Group, Inc.
2,	he name and address of the registered agent and office is:
	Marcelo Eugenio Faure (P.O. BOX NOT ACCEPTABLE)
	18090 Collins Ave. T-4 North Miami Beach, Fl 33160
	SIGNATURE (corporate officer)  TITLE Vice Resident  DATE 1-3-86
CO FO PR	NG BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED PORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE VISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SEC-
	607.325, FLORIDA STATUTES.  ALLAHI
	DATE 1-3-96 FO P TO
	NOTE 34

REGISTERED AGENT FILING FEE: