P	91~			
l	TRANSI	WITTAL LETT	TER	
Department of State Division of Corporatior P. O. Box 6327 Tallahassee, FL 32314	15		-(97 10000190149 17/23/9601045012 1444478.75 +++++78.7
SUBJECT: <u>FLIYA</u> (F	IHU Inc Proposed corporati	a name - must include su	ffix)	
Enclosed is an origina for :	I and one (1) c	opy of the articles o	f incorporation a	and a check
570.00 Filing Fee	√ \$78.75 Filing Fee & Centificate	Filing Fee & Certified Copy Additional Copy	stat.25 Filing Fee, Certified Copy & Certificate Y Required	
FROM:	Name	YNN (printed or typed)		
	BOLA RATO	N AL 33487		7/00/16
	C	ity, State & Zip		'+())

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NOTE: Please provide the original and <u>one copy</u> of the articles.

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

LLIYAHU INC

ARTICLE II PRINCIPAL OFFICE

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

311 HUHAWK CANE BUCH RATUN R 33487

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ELI SHEYNIN 371 HOHAWK LANE BOCA RATON FL 33487



ARTICLE V INCORPORATOR(S) See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LLE SHEENIN 34 HOHNER EARE BEEN ANTONY FE BBYRT

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

<u>II.</u> day of <u>July</u>, 19<u>96</u>.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1.	The name of the corporation is:	CCIVANI Inc		
2.	The name and address of the regist	ered agent and office is:		<u>ה</u> בו
	ELI SIL	(Nаме)		
	<u>371 Монак</u> (Р.О. Вол	K LANE (or Mail Drop Box <u>NOT</u> acceptable)	<u>-</u>	
	BOCH RATON	/ FL 33487- (City/State/Zip)		

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered 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 obligations of my position as registered agent.

'n

<u>7/16/96</u> (DATE) (SIGNATURE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314