

P97000037670

TRANSMISSION CENTER

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

SUBJECT: TIFFANY Fashions, Inc.  
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 122.50.

500002155555--7  
-04/25/97--01097--010  
\*\*\*\*122.50 \*\*\*\*122.50

FROM:

Guillermo Torres  
Name  
5035 SW 99 AVE.  
Address  
MIAMI - FL. 33165  
City, State, & Zip  
(305) 596-1998  
Telephone Number

FILED  
97 APR 25 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Note: Additional copy of articles is needed when certified copy is requested.

APR 26 1997  
[Signature]

CERTIFICATE OF INCORPORATION  
OF

TIFFANY FASHIONS, INC.

FILED  
97 APR 25 PM 2:15  
TALLAHASSEE, FLORIDA

WE, the undersigned, hereby make, subscribe and acknowledge this certificate for the purpose of becoming a corporation under the laws of the State of Florida.

1. The name of the corporation shall be:

TIFFANY FASHIONS, INC.

and its existence shall be perpetual.

2. The general nature of the business to be transacted shall be SEWING CLOTHES , and to invest in property of any kind, operate businesses, lend money, and to have all other powers provided by the laws of the State of Florida.

3. The capital stock of the corporation shall consist of fifty (50) shares, without nominal par value.

4. The amount of capital with which this corporation shall begin business is not less than FIVE HUNDRED DOLLARS.

5. The principal office of this corporation shall be

6930 W 27 Avenue, Hialeah, Fl. 33016

6. The number of directors shall be at least one (1), and the names and post office addresses of the first Board of Directors and Officers are:

<u>NAME</u>	<u>OFFICE</u>	<u>POST OFFICE ADDRESS</u>
1. AMALIA GONZÁLEZ	PRESIDENT	6930 W 27 Ave. Hialeah, Fl. 33016

7. The names and post office addresses of the subscribers to this Certificate of Incorporation, and the number of shares each agrees to take, and the consideration therefore, the proceeds of which will amount to not less than FIVE HUNDRED DOLLARS (\$500.00), are as follows:

<u>NAME AND ADDRESS</u>	<u>NO. OF SHARES</u>	<u>CONSIDERATION</u>
1. AMALIA GONZALEZ 6930 W 27 Ave. Hialeah, Fl. 33016	50	\$ 500.00

8. AMALIA GONZALEZ is hereby designated as the  
Registered Agent for the corporation and 6930 W 27 Ave.  
Hialeah, Fl. 33016 its address.

IN WITNESS WHEREOF, the undersigned hereby subscribe to this  
Certificate of Incorporation at Miami, Florida this 22 day of  
APRIL, 1997, for the uses and purposes aforesaid.

Amalia Gonzale

STATE OF FLORIDA     )  
                              )   SS.  
COUNTY OF DADE     )

BEFORE ME, the undersigned authority, personally appeared

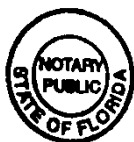
*AMALIA GONZALEZ*

subscriber(s) and person(s) described in and who executed the foregoing Certificate of Incorporation, who acknowledged before me that they did subscribe thereto, and did so for the uses and purposes therein contained.

SWORN TO and SUBSCRIBED before me at Miami, Dade County, Florida this the 22 day of APRIL, 1997.

  
\_\_\_\_\_  
Notary Public, State of FL

My Commission Expires:



GUILLERMO TORRES  
My Comm. Exp. 6/23/98  
Bonded By Services Ins.  
No. CC 386693

( ) Personally Known ( ) Other LD.

CERTIFICATE OF DESIGNATING PLACE OF BUSINESS  
OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN  
FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 28.091, Florida Statutes, the  
following is submitted:

FIRST--THAT

desiring to organize or qualify under the laws of the State of  
Florida, with its principal place of business at the City of  
Miami, State of Florida, has named TIFFANY FASHIONS, Inc.  
located at 6930 W 27 Ave, Hialeah, Florida,  
as its Agent to accept service of process within Florida.

Amalia Goyatz  
CORPORATE OFFICER

TITLE PRESIDENT

DATE April 22-97

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE  
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,  
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO  
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER  
AND COMPLETE PERFORMANCE OF MY DUTIES.

Amalia Goyatz  
RESIDENT AGENT

DATE April 22-97

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TALLAHASSEE, FLORIDA