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FLORIDA DIVISION OF CORPORATIONS  
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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.  
CONTACT: LIDIA FERNANDEZ  
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NAME: SNEHA CORP.

AUDIT NUMBER.....H97000014171

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 3

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FAS-T CORP. AGENTS, INC.  
LIDIA FERNANDEZ

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TREASURY

**ARTICLES OF INCORPORATION**  
**OF**

**SNEHA CORP.**

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 I NAME**

The name of the corporation shall be: **SNEHA CORP.**

The principal place of business of this corporation shall be:

**14411 COMMERCE WAY, STE 310  
MIAMI LAKES, FL 33016**

**ARTICLE II NATURE OF BUSINESS**

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 value that this corporation is authorized to have outstanding at any one time is:

**500 SHARES, \$1 PAR VALUE**

**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):

**DIRECTOR  
NICHELE STEFANELLI  
14411 COMMERCE WAY, STE 310  
MIAMI LAKES, FL 33016**

Prepared by: Michele Stefanelli  
14411 Commerce Way, Suite 310  
Miami Lakes, FL 33016  
(305) 557-0303

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**ARTICLE VI INCORPORATOR(S)**

**The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):**

**MICHELE STEFANELLI  
14411 COMMERCE WAY, STE 310  
MIAMI LAKES, FL 33016**

**IN WITNESS WHEREOF, the undersigned incorporator(s) has(have)  
executed these Articles of Incorporation this 26TH day  
of AUGUST, 19 97**

**Signature(s) of Incorporator(s)**

Michele Stefanelli

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\_\_\_\_\_

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TALLAHASSEE, FLORIDA

**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.

1. The name of the corporation:

SNERA CORP.

2. The name and address of the registered agent and office is:

MICRELE STEFANELLI

(P.O. BOX NOT ACCEPTABLE)

14411 COMMERCE WAY, STE 310 MIAMI LAKES, FL 33016

(CITY/STATE/ZIP)

SIGNATURE

Micrele Stefanelli

TITLE

DIRECTOR

DATE

8/26/97

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, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

Micrele Stefanelli

DATE

8/26/97

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