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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SECRETARY OF STATE TALLAHASSEE, FLORIDA

P. O. Box 6327 Tallahassee, FL 32314			•	
SUBJECT: <u>He</u>	mispheres (Proposed co	Shops I	wc Suffix)	
	٠		600002309 -10/02/970 *****78.75	756!)1045017 *****78.7
Enclosed is an original ar	nd one(1) copy of the articles	of incorporation and a	check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	J ,	
		ADDITIONAL CO	DPY REQUIRED	
FROM:	Yevgeniya Name (Pr	Zaslav rinted or typed)	skaya	
17500 North Bay Rd #502 Address				
North Miami Beh Fl 33160 City, State & Zip (305) 935-5426 (954) 455-0853 Daytime Telephone number GAVE				
		CORRECT	rane_	कर [्] ।क्या
		DATE TO TO THE	of the articles. Q yell	0-
NO	TE: Please provide the o	riginal and one copy o	of the articles.	

ARTICLES OF INCORPORATION

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Hemispheres Shops INC.

ARTICLE II PRINCIPAL OFFICE

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

1985 South Ocean Drive Hallandale FL 33009

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Yevgeniya Zaslauskaya

17500 North Boy Rd#502 North Miami Bch Fl 33160

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Yevgeniya Zaslavskaya

North Miain, 18ch Fl 33160

Signature/Incorporator

9/30/97 Date

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

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

Signature/Registered Agent

30/9+