## Department Division of Corporations P.O. Box 6327

800002645008---09/21/98--01115--016 \*\*\*\*122.50 \*\*\*\*122.5 R.B.E. Woeldwide Toxtiles, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

Tallahassee, FL 32314

\$78.75

Filing Fee

Filing Fee

& Certificate

\$122.50

Filing Fee & Certified Copy **□** \$131.25

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: TOSE V. SIVA

Name (Printed or typed)

3809 SW 142nd AVENUE

Miami, Florida 33175 City, State & Zip

305 - 553 - 0 240

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.





## ARTICLES OF INCORPORATION

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

Signature/Incorporator	Date
Challed ahan	9/15/98
MIAMIIF!	33185
750 NW 13	SUPPACE ES N
Elizahet	h Alvarez 照显
The name and address of the incorporator to these Articles of	of Incorporation are:
ARTICLE V INCORPORATOR	7111
MAMIAPI	33182
Elizabeth 750 NW 13' Miami iPl	HIVAKOZ PS 8 -
The name and Florida street address of the initial registered ag	gent are:
ARTICLE IV INITIAL REGISTERED AGENT A	AND STREET ADDRESS
100 Shares	3 80 1 NO FITE 14100 1
The number of shares of stock that this corporation is authoriz	sed to have outstanding at any one time is:  Sout No Par Value.
ARTICLE III SHARES	
WIAWIIE	0000
3809 SW	DEIDA 33175
The principal place of business and mailing address of this cor	rporation shall be:
ARTICLE II PRINCIPAL OFFICE	المستعدد الم
The name of the corporation shan be.	
The name of the corporation shall be: Q.B.E	WORLDWIDE INC.
ADTICLE I MAME	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

(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 ohligations of my position as registered agent

Signature/Registered Agent