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LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

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MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. PAFECA USA, INC.

(Corporation Name)

(Document #)

2. (Corporation Name)

(Document #)

3. (Corporation Name)

(Document #)

4. (Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time 2:00

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☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-04/08/99-01074-006

*****78.75 *****78.75

SECRETARY OF STATE
TALLAHASSEE FLORIDA

99 APR -8 PM 3:24

FILED

RECEIVED
99 APR -8 PM 11:40
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Examiner's Initials

FILED
99 APR -8 PM 3:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

PAFECA USA, INC.

ARTICLE II PRICIPAL OFFICE

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

323 Navarre Ave, Unit #101

Coral Gables, Fla. 33134

ARTICLE III SHARES

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

Two Hundred (200) Shares

ARTICLE IV INITIAL REGISTERED AGENT AND SRTEET ADDRESS

The name and address of the initial registered agent is:

Maria Jaqueline Ferreiroa
323 Navarre Ave. Unit #101
Coral Gables, Fla. 33134

ARTICLE V INCORPORATOR(S)

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

Ramiro Pablo Ferreiroa, Pr. 323 Navarre Ave. Unit #101, C.Gables

Maria Jaqueline Ferreiroa, V.P/Sec. 323 Navarre Ave. Unit #101 C. Gables

Blanca Monasterios, Treasure, 323 Navarre Ave. Unit #101 C. Gables

ARTICLE VI DIRECTOR(S)

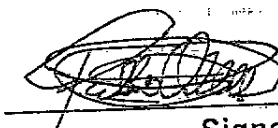
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):

Ramiro Pablo Ferreiroa, 323 Navarre Ave. Coral Gables

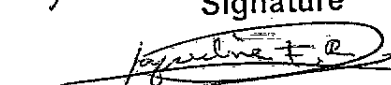
Maria Jaqueline Ferreiroa, 323 Navarre Ave. Coral Gables

Blanca Monasterios, 323 Navarre Ave. Coral Gables

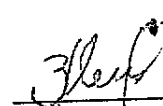
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 07 day of April, 1999.



Signature



Signature



Signature

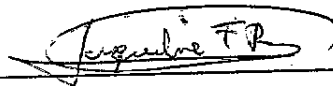
CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: PAFECA USA, INC.
2. The name and address of the registered agent and office is:
MARIA JAQUELINE FERREIROA
(NAME)
323 NAVARRE AVE. UNIT #101
(P.O. BOX NOT ACCEPTABLE)
CORAL GABLES, FLA. 33134.
(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.

SIGNATURE _____



DATE 4/7/99

REGISTERED AGENT FILING FEE: \$35.00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

99 APR -8 PM 3:24

FILED