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

1. ~~CHARR INC.~~  
 (Corporation Name) \_\_\_\_\_ (Document #) \_\_\_\_\_
2. \_\_\_\_\_  
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- Walk in     Pick up time 2.00     Certified Copy
- Mail out     Will wait     Photocopy     Certificate of Status

99 APR 16 PH 3:19  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

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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

*1099-9032*  
*4/14*

99 APR 15 AM 11:25  
 DIVISION OF CORPORATION

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

April 15, 1999

LAZARUS

MIAMI, FL

SUBJECT: CHAAR INC.  
Ref. Number: W99000009032

We have received your document for CHAAR INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole  
Corporate Specialist

Letter Number: 599A00019337

RECEIVED  
99 APR 16 PM 2:57  
DIVISION OF CORPORATIONS  
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:

CHAAR ENTERPRISE, INC.

99 APR 16 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

## ARTICLE II PRINCIPAL OFFICE

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

**220 71st Street # 213- Miami Beach , Fl. 33141**

## ARTICLE III SHARES

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

**100 of \$1 Par Value**

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Ugo V. Chiarato**

**220 71st Street Ste # 213  
Miami Beach , Fl. 33141**

**ARTICLE V INCORPORATOR(S)**

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

**President/Treasurer/secretary**

**JOSE MARIA TEIXEIRA CHAAR**

**220 71st Street --- Suite # 213**

**Miami Beach , Florida 33141**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

4th day of March, 19 99

Jose Maria Teixeira Chaar  
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: CHAAR ENTERPRISE INC.

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

Ugo V. Chiarato

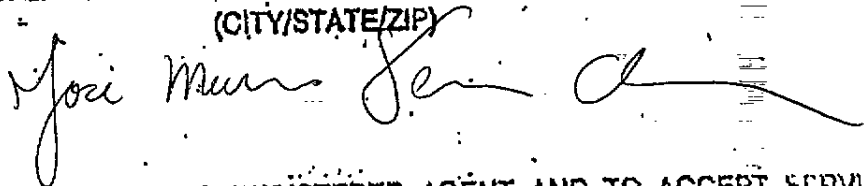
(NAME)

220 71st Street ----- Ste # 213

(P.O. BOX NOT ACCEPTABLE)

Miami Beach, Florida 33141

(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 Ugo V. Chiarato

DATE March 4, 1999

SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
99 APR 16 PM 3 19

**FILED**