

P99000104529

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

EFFECTIVE DATE

12-1-99

FILED  
99 NOV 29 PM 12:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SUBJECT: SHAVA CORP.

(Proposed corporate name - must include suffix)

Enclosed is an original and (1) one copy of the Articles of Incorporation and a check for \$78.75

FROM: GELBER AND COMPANY

800003055898--7  
-11/29/99--01145--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Name

285 N.W. 199<sup>TH</sup> Street, Suite 204

Address

Miami, FL 33169

City, State & Zip

(305) 651-8000

Daytime Telephone number

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TALLAHASSEE FLORIDA

## 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.*

### ARTICLE I NAME

The name of the corporation shall be **SHAVA CORP.**

### ARTICLE II PRINCIPAL OFFICE

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

**10800 BISCAYNE BLVD., #540  
NORTH MIAMI, FL 33161**

### 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:

**ROBERT DUKE  
10800 BISCAYNE BLVD., #540  
NORTH MIAMI, FL 33161**

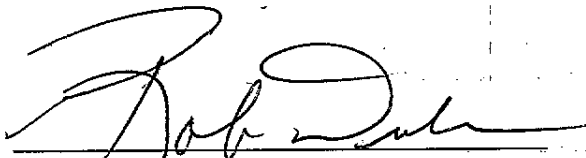
### ARTICLE V INCORPORATOR

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

**ROBERT DUKE  
10800 BISCAYNE BLVD., #540  
NORTH MIAMI, FL 33161**

**ARTICLE VI**      **EFFECTIVE DATE**

The effective date of this corporation shall be: **DECEMBER 1, 1999**

  
\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

11/23/99

*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

\_\_\_\_\_  
Date

11/23/99