Division of Corporations

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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346 OZ JUL -9 PM 12: 26

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LIMITED LIABILITY COMPANY

ALVAREZ, ROJAS & ASSOCIATES, LLC

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ARTICLES OF INCORPORATION FOR FLORIDA LIMITED LIABILITY COMPANY OF ALVAREZ, ROJAS & ASSOCIATES, LLC

ARTICLE I - NAME

The name of the Limited Liability Company is:

ALVAREZ, ROJAS & ASSOCIATES, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

1985 NW 88 Court, Ste 201 Miami, FL 33172

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Alvarez & Associates CPAs, PA 1985 NW 88 Court, Ste 201 Miami, FL 33172

Having been named as registered agent and to accept service of process for the above named limited liability company at the place designated in this certificate, thereby accept the appointment as registered agent and agree to act in this full capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and than familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are:

Alvarez & Associates CPAs, PA 1985 NW 88 Court, Ste 201 Miami, FL 33172

A.M. Rojas P.A. 1985 NW 88 Court, Ste 201 Miami, FL 33172

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Vivian D. Alvarez, President of Alvarez & Associates CPAs, PA

Typed or printed name of signee

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