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LAZARUS CORPORATE FILING SERVICE

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(City, State, Zip)

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TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

400003830254--9

-03/12/01--01014-025

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

OFFICE USE ONLY

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

1. VENUS COMPANIONS, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

RECEIVED
01 MAR 12 AM 10:12
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

FILED
01 MAR 13 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
3/12
Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

March 12, 2001

LAZARUS

MIAMI, FL

SUBJECT: VENUS COMPANIONS, INC.
Ref. Number: W01000005518

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

A post office box is not an acceptable address for the registered agent.

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: 901A00015000

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 MAR 13 AM 10:43
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

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:

Venus Companions, Inc.

01 MAR 13 PM 1:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE II - PRINCIPAL OFFICE

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

10000 SW 53 Street
Miami, FL 33165

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 address of the initial registered agent is:

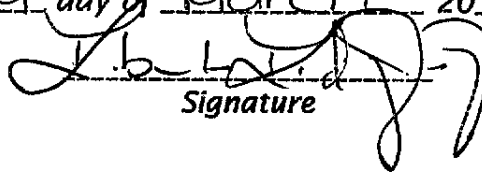
Veronica Cruz
10000 SW 53 Street
Miami, FL 33165

ARTICLE V - INCORPORATOR

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

Roberto Rodriguez
10000 SW 53 Street
Miami, FL 33165

The undersigned incorporator has executed these Articles of Incorporation this 9th day of March 2001


Signature

ARTICLE VI- DIRECTOR(S)

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

President: Roberto Rodriguez
10000 SW 53 Street, Miami, FL 33165
V. President: Veronica Cruz
10000 SW 53 Street, Miami, FL 33165

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


Registered Agent Signature

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TALLAHASSEE FLORIDA