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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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**FLORIDA PROFIT CORPORATION OR P.A.
CARTAYA PLUMBING SOLUTIONS, CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	02
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(3)
[Signature]

[Checkmarks]

ARTICLES OF INCORPORATION

OF

CARTAYA PLUMBING SOLUTIONS, CORP.

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I- NAME

The name of the corporation shall be:

CARTAYA PLUMBING SOLUTIONS, CORP.

ARTICLE II- PRINCIPAL OFFICE

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

**1072 EAST 20 ST.
HIALEAH, FL 33013**

ARTICLE III- SHARES

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

100 Shares of Common Stock

ARTICLE IV-INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**CARLOS CARTAYA 1072 EAST 20 ST.
HIALEAH, FL 33013**

ARTICLE V- INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: **CARLOS CARTAYA** 1072 EAST 20 ST. HIALEAH, FL 33013

The undersigned incorporator has executed these Articles of Incorporation this 11th day of February 2003.


Signature

ARTICLE VI-DIRECTORS(S)

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

CARLOS CARTAYA (President/Director) 1072 EAST 20 ST. HIALEAH, FL 33013

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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