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FLORIDA PROFIT CORPORATION OR P.A.

Villa Del Conte Inc.

Certificate of Status	1
Certified Copy	0
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9-15-15

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.

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SECRETARY OF STATE

ARTICLE I NAME

The name of the corporation shall be:

**Villa Del Conte Inc.**

ARTICLE II PRINCIPAL OFFICE

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

**Villa Del Conte Inc.  
7602 Maple Street  
Marengo, IL 60152**

ARTICLE III SHARES

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

**100 Shares at \$10.00 Par Value**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Luciano Zecchin  
3657 Grand Cypress Drive  
Naples, FL 34119**

*Prepared By:*  
**Bruce B. Hubbard  
77 East John St.  
Hicksville, New York 11801  
1-516-935-3940**

**ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)**

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

**Luciano Zecchin - President**  
7602 Maple Street  
Marengo, IL 60152

**ARTICLES VI INCORPORATOR(S)**

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

**Luciano Zecchin**  
7602 Maple Street  
Marengo, IL 60152

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

14th day of September 2005.

  
\_\_\_\_\_  
Luciano Zecchin - Signature

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Villa Del Conte Inc.

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

Luciano Zecchin

Name

3657 Grand Cypress Drive


(P.O. Box or Mail Drop Box NOT Acceptable)

Naples, FL 34119

(City / State / Zip)

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TALLAHASSEE, FLORIDA

*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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

  
Luciano Zecchin  
SIGNATURE

September 14, 2005  
(Date)