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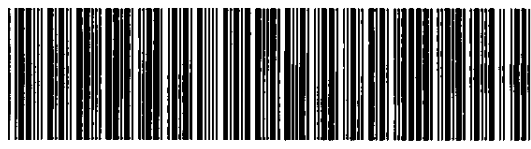
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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October 20, 2010

SMART RISK SOLUTIONS, INC.  
5491 N UNIVERSITY DR SUITE 204  
CORAL SPRINGS, FL 33067

SUBJECT: SMART RISK SOLUTIONS, INC  
Ref. Number: W10000046479

We have received your document for SMART RISK SOLUTIONS, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

An effective date may be added to the Articles of Incorporation **if a 2011 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the corrected 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) 245-6929.

Justin M Shivers  
Regulatory Specialist II  
New Filing Section

Letter Number: 210A00023524

ARTICLES OF INCORPORATION  
OF  
SMART RISK SOLUTIONS, INC

The undersigned incorporator hereby forms a corporation in Compliance with the Chapter 607 and Chapter 621 of the Florida Statutes.

ARTICLE 1  
NAME

The name of the Florida Corporation is SMART RISK SOLUTIONS, INC.

ARTICLE 2  
ADDRESS AND PRINCIPAL OFFICE OF THE COMPANY

The principal place of business and mailing address is at 5491 N University Dr. Ste 204, Coral Springs Fl 33067, County of Broward, State of Florida, but it shall have the power and authority to establish branch office at any other places as the directors may designate.

ARTICLE 3  
OBJECT AND PURPOSE OF THE COMPANY

The general object and purpose for which the Corporation is organized is to engage in the Risk Management Business to support client and its affiliates in developing current and new market segments mainly in the Latin America Region and to transact any or all lawful business for which companies may be formed under the laws of the State of Florida.

ARTICLE 4  
SHARES

The shares on profit and losses and address of the initial shareholders of this company are as follows:

Name: ARP GROUP SOCIEDAD DE CORRETAJE  
Share: 51%  
Address: CCCT TORRE C PISO 10, OFC 6 CHUAO  
CARACAS 1060, VENEZUELA.

Name : ANGEL RIVERO PAZ  
Share: 49%  
Address: Calle Manzanares Qta Barrilete Colinas de Tamanaco  
Caracas 1060, Venezuela

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ARTICLE 5  
DIRECTORS/OFFICERS

This Company is managed by Directors with the position of President and Vice President. The in initial directors of the Company are two (2), to hold office until their successors have been duly elected and qualified, or until their earlier resignation, removal from office or death. Their name and addresses follow:

**Names and addresses:**

**President**

JOEL D. LEDEZMA Mailing Address: 5491 N University Dr. Ste 204, Coral Springs Fl 33067

**Vice- President**

ANGEL RIVERO PAZ Mailing Address: 5491 N University Dr. Ste 204, Coral Springs Fl 33067

ARTICLE 6  
CAPITAL CONTRIBUTIONS

Capital contributions in the amount of \$10,000.00. The total amount of capital stock authorized by this Corporation Herein Know as SMART RISK SOLUTIONS, INC shall be 100 shares of par value stock. Each share of stock shall have one hundred (100.00) Dollars par value.

ARTICLE 7  
DURATION AND EFFECTIVE DAY

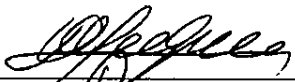
This company shall exist perpetually until dissolved in a manner provide by law, or as provide in the regulations adopted by directors.

The effective date for this Company shall be: September 27, 2010.

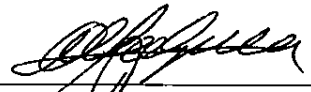
ARTICLE 8  
INITIAL REGISTERED OFFICE AND REGISTERED AGENT


The office and mailing address of the initial registered office of the corporation is 5491 N University Dr, Ste 204, Coral Springs Fl 33067, County Broward, and the name of the initial registered agent at the address is Joel Ledezma.

The undersigned, being the original directors of the Company, certify that this instrument constituted the Articles of Incorporation of SMART RISK SOLUTIONS, Inc. Executed by the undersigned at 5491 N University Dr. Ste 204, Coral Springs Fl 33067.

  
\_\_\_\_\_  
Joel Ledezma Registered Agent

In WITNESS WHEREOF, the Directors have hereunto executed this Agreement as of the day and year first above written.

By:   
\_\_\_\_\_, President

By:   
\_\_\_\_\_, Vice-President

Statement Designating Registered Agent and Office

State of Florida }

County of Broward }

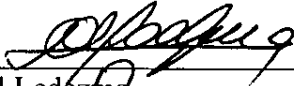
Pursuant to Charter 607 and 621 of the Florida Statutes, the Corporation identified below submits the following statement in designating its registered office and registered agent in the State of Florida:

The name of the Corporation is SMART RISK SOLUTIONS, Inc

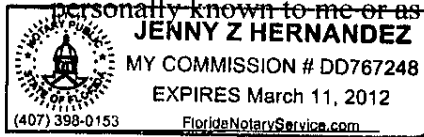
The name of the registered agent for SMART RISK SOLUTIONS, Inc is Joel Ledezma and the street and address of the Company's principal office where the agent is located is 5491 N University Dr, Ste 204 Coral Springs Fl 33067.

This statement is to acknowledge that, as indicate above; SMART RISK SOLUTIONS, Inc has appointed Joel Ledezma as its registered agent to accept service of process for the company at the place designate above in this certificate. I accept this 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.

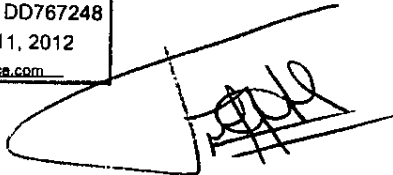
Date: OCT. 25, 2010

  
\_\_\_\_\_  
Joel Ledezma

The foregoing instrument was acknowledged before me this 10/25/10 by Joel Ledezma, agent on behalf of SMART RISK SOLUTIONS, Inc a Florida company. He is personally known to me or as produced Driver License as identification.



Signature of Notary.



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