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TO: DIVISION OF CORPORATIONS FAX #: (850)922-4001
FROM: EMPIRE CORPORATE KIT COMPANY ACCT#: 072450003255
CONTACT: RAY STORMONT PHONE: (305)541-3694 FAX #: (305)541-3770

NAME: PINHO ASSOCIATES, INC.
AUDIT NUMBER.....H97000018216
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.
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(3)

ARTICLES OF INCORPORATION
FOR

PINHO ASSOCIATES, INC.

NAME

The name of the corporation is: PINHO ASSOCIATES, INC.

PRINCIPAL OFFICE

The principal office of the corporation is:

815 Springs Circle #206
Deerfield Beach, FL 33441

NUMBER OF SHARES

The number of shares the corporation is authorized to issue is 100 shares with a par value of \$1.00 each.

INITIAL BOARD OF DIRECTORS

The incorporator shall hold an organizational meeting at the call of a majority of the incorporators to elect directors and complete the organization of the corporation, or may take such action without a meeting in writing as provided by law.

PREEMPTIVE RIGHTS

The Shareholders shall have the preemptive right to purchase unissued shares of the corporation.

INCORPORATOR

The name and address of each incorporator is:

Elizabeth M. Pinho
815 Spring Circle #206
Deerfield Beach, FL 33441

BARRY D. Kowitz, ESQ
1801 N. Pine Island Rd
Suite 101
Plantation, FL 33322
FL. BAR No. 987417

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REGISTERED OFFICE AND AGENT

The street address of the corporation's initial registered office and the name of its initial registered agent at that office is as follows:

Elizabeth M. Pinho
815 Spring Circle #206
Deerfield Beach, FL 33441

ACCEPTANCE

The undersigned does hereby accept his appointment as registered agent as set forth above.

Elizabeth M. Pinho

IN WITNESS WHEREOF the undersigned incorporator has hereunto set his hand and seal on this 31 day of October, 1997.

Elizabeth M. Pinho

STATE OF FLORIDA)
) SS
COUNTY OF BROWARD)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared Elizabeth M. Pinho, to me know to be the person described in and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 31 day of October, 1997.

[Signature]
Notary Public

My Commission Expires:



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TALLAHASSEE, FLORIDA

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