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Division of Corporations

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From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

FLORIDA PROFIT/NON PROFIT CORPORATION

Orlando Bartending School Inc.

| Certificate of Status | 1 |
|-----------------------|---------|
| Certified Copy | 0 |
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10/5/2006

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:

Orlando Bartending School Inc.

ARTICLE II PRINCIPAL OFFICE

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

Orlando Bartending School Inc. 124 Robin Road, Suite 1400 Altamonte Springs, FL 32701

ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michael Perusse 124 Robin Road, Suite 1400 Altamonte Springs, FL 32701

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

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

Michael Perusse - President/Director 124 Robin Road, Suite 1400 Altamonte Springs, FL 32701

ARTICLES VI INCORPORATOR(S)

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

Michael Perusse 124 Robin Road, Suite 1400 Altamonte Springs, FL 32701

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

3rd day of October 2006.

Michael Perusse - 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: Orlando Bartending School Inc. |
|------------------------------------|--|
| 2. The name and address of the re- | gistered agent and office is: |
| | Michael Perusse |
| | Name |
| | 124 Robin Road, Suite 1400 |
| | (P.O. Box or Mail Drop Box NOT Acceptable) |
| | Altamonte Springs, FL 32701 |

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.

.

Michael Perusse

SIGNATURE

October 3, 2006

(Date)