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FLORIDA PROFIT/NON PROFIT CORPORATION **CONSERVADORES INC**

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ARTICLES OF INCORPORATION FOR

2010 MAR 18 P 1: 45
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME:

The name of the corporation shall be:

CONSERVADORES

INC

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

95 MERRICK WAY SUITE 610 COMAN GABIES FLA 33135

ARTICLE III PURPOSE (S)

The specific purpose(s) for which the corporation is organized is (are):

A POLINCAL ARTION COMMITTEE FOR THE PURPOSES OF FUNDING ELECTED OFFICIALS TO RABLIC OFFICE

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

The manner in which the directors are elected or appointed is as follows:

By the by-LAWS

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ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided the section 617.0302, Florida Statutes, unless limited as follows:

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

M. ANTONIO CALATAYUD 95 MGCRICK WAY 5U, TE 610 COLA, GADLY, RLA 33135

ARTICLE VII DIRECTORS (must have the minimum of three directors); NAME AND ADDRESS

M. ANTON 10 CATATAYUD MARIA CATATAYUD LUIS N. PEREZ 95 MENRICK, SUTTE 610 COMAN GABLES, FLA 3375 (FIN ALL)

ARTICLE VIII INCORPORATOR

The name and street address of the incorporator for these Article of

Incorporator is:

95 MERRICK WAY SUITE 610 CORAL GARLES, K 33135

M. ANTONIO CALATAYUD
The undersigned incorporator has executed these Articles of
Incorporation this 8 day of MANCH., 2010

Signatu

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

2010 HAR 18 P 1: 45

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:

ONSCHUMORES LINC.

(must Includes suffix)

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

1000 0011 9 301

P.O. Box or Mail Drop Box NOT Acceptable

(City/State/Zip)

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 appointed 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 a m familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent

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