POODOOOS82/

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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SUBJECT: C.V.M. Technology. INC. (Proposed corporate name - must include suffix)						
(Proposed corporate name - must include suffix)						
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:						
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
FROM: Viviana M. Price Name (Printed or typed)						·
7303 NW 12 Street Address				OO JAN 10 PM	FLED	
Miami, FL 33126 City, State & Zip				PM 1:50	-	
(305) 594-3149 Daytime Telephone number						

T. Burch - JAN 1 9 2000

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

-<u>ARTICLE I NAME</u>

The name of the corporation shall be:

C.V.M. Technology, INC

ARTICLE II PRINCIPAL OFFICE

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

7303 NW 12 Street Miami, FL 33126

<u>ARTICLE III SHARES</u>

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

10,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Viviana M. Price 7303 NW 12 Street Miami, FL 33126

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Viviana M. Price 7303 NW 12 Sareet Miami, FL 33126

Signature/Incorporator

01-06-2000

Date

(An additional article must be added if an effective date is requested.)

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 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

Signature/Registered Agent

16-900

Date