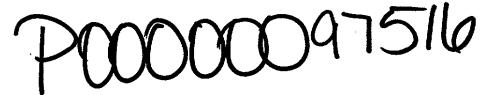
Division of Corporations

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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : GARSOZA SERVICES, INC.
Account Number : I1999000075
Phone : (954)070 : (954)979-4565 : (954)979-2421 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

Guarmieri Corporation

Certificate of Status	1
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Corporate Filing.

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B. McKnigh OCT 1 7 2000

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ARTICLES OF INCORPORATION

OF

GUARNIERI CORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Guarnieri Corporation

ARTICLE II PRINCIPAL OFFICE

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

433 SW 1 Ct., Apt# 307 Pompano Beach, FL 33060

ARTICLE III SHARES

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

One thousand (1000) common shares at no Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Edvaldo R. Guarnieri 433 SW 1 Ct., Apt# 307 Pompano Beach, FL 33060 DIVISION OF CURPORATION

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ARTICLE V INCORPORATOR(S)

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

Edvaldo R. Guarnieri 433 SW 1 Ct., Apt# 307 Pompano Beach, FL 33060

ine undersigned this	Incorporator	'(s) has(have) exe	cuted these Articles of Incorp	oration
16th	day of	October	, 2000.	
		an Gu	IRNIERI	
	<i>ـ</i> ــ.	··· Signature	·	
		N/A		
		Signature		
		N/A		
		Signature		

Facsimile audit number:__ H000000545483 ___

Garsoza Svcs

Facsimile audit number: H000000545483		
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT		
PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLOF STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.	THE	
1. The name of the corporation is:		
GUARNIERI CORPORATION		0
The name and address of the registered agent and office is: Edvaldo R. Guarnieri	00 OCT 17 AM11: 2	DIVISION OF CONFURATIONS
(Name) 433 SW 1 Ct. Apt# 307	3	ORPHAT
(Address - P.O.Box not acceptable)	26	SEC
Pompano Beach, FL 33060		
(City, State & Zip)		
Having been named as registered egent and to accept service of process for the above corporation at the place designated in this certificate, I hereby accept the appointment as registagent and agree to act in this capacity. I further agree to comply with the provisions of all strelating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent. [Supposition of the property of the above corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to comply with the provisions of all strengths and I am familiar with and accept agent.	stered atutes	•
(Signature) (Date)		
DIVISION OF CORPORATIONS, P.O.BOX 6327, TALLAHASSEE, FL 32314		

Facsimile audit number:__

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