LAZARUS CORPORATE FILING SERVICE

(Requester's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. XLS SERVICES AND INVESTMENTS INVESTM

SA ROMAN (TALLAHASSEE REPRESENTATIVE)	OFFICE USE ONLY
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CORPORATION NAME(S) & DOCUMENT NUME	DEK(S) (il known):
XLS SERVICES AND	INVESTMENTS INC.
(Corporadon Harne)	, pocoment w)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
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(Corporation Name)	(Document #)
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Other	Translation Tables
Other	Examiner's Initials

ARTICLES OF INCORPORATION

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

<u> ARTICLE I - NAME</u>

The name of the corporation shall be:

XLS SERVICES and Investments 里心C.

ARTICLE II - PRINCIPAL OFFICE

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

P.O Box 94-0181 Miami, 71. 33174

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Enviour de la Barca 4436-500 14200 P) Miami, 71 83175

<u>ARTICLE V - INCORPORATOR</u>

The name and stre Incorporation is:	et address of the in		
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,,	4436' SW	de 18	
•	Miami 71	33175	<i>:</i>
The undersigned in Incorporation this	ncorporator has exe 18 day of Dece	\wedge	ticles of
	Agna	lure	

ARTICLE VI- DIRECTOR(S)

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

Eulipue de la Barca President

P.D. Box 94-0181

Miami, 71 88174

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registeren Agent Signature