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 : GARSDZA SERVICES, INC.

Account Number : 119996000075 Phone : (954)979-4565 : (954)979-2421 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

JLR Cable Guy, Inc.

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\$28.75

Electronic Filing Menu.

Corporate Filing,

Public Access Help.

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ARTICLES OF INCORPORATION

OF

JLR Cable Guy, Inc.

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:

JLR Cable Guy, Inc.

ARTICLE II PRINCIPAL OFFICE

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

14573 SW 98 Terrace Miami, FL 33186-6920

ARTICLE III SHARES

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

One hundred (100) common shares at no Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Juan L Rodriguez 14573 SW 98 Terrace Miami, FL 33186-6920 SECRETARY OF STAILORS
DIVISION OF CORPORATIONS
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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);

Juan L Rodriguez 14573 SW 98 Terrace Miami, FL 33186-6920

The undersignathis	ned incorporator(s) has(have) executed these	Articles of Incorporation
26th	day ofFebruary	, 2001.
	Signature	
	N/A	
	Signature	
	N/A	
	Signaturo	

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 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.

1. The name of the corporation is:

(Signature)

JLR Cable Guy, Inc.

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

Juan L Rodriguez

(Name) 14573 SW 98 Terrace

(Address - P.O.Box not acceptable) Miami, FL 33186-6920

(City, State & Zip)

Having boon named as registered agent and to accept service of process for the above state 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 propor and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

2/26/01

(Date)

DIVISION OF CORPORATIONS, P.O.BOX 6327, TALLAHASSEE, FL 32314

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SECRETARY OF STATE