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March 1, 2001

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

600003828796--; -03/09/01--01110--001 ****121.50 ******78.75

Re; HARRI K.K., INC. (name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Article of Incorporation together with my check in the amount of \$ 121.50.

This represents the cost of the Filing fees, Certified Copy of Articles of incorporation and fee for registered Agent Designation for the above named corporation.

Very Truly Yours,

HARRI K.K., INC. (name of corporation)

MAILING ADDRESS OF CORPORATION

__719 W. PINE STREET_____

_LANTANA, FL. 33462_____

PHONE

____(561)586-0666__EXT_____

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SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

GENTLEMEN:

THE PURPOSE OF FORMING THIS CORPORATION IS TO ENGAGE IN CAR REPAIR BUSINESS

THE CORPORATION IS NOT LIMITED TO

CAR REPAIR BUSINESS

YOURS TRULY,

ARTICLES OF INCORPORATION OF

HARRI K.K., INC.
(name of corporation)
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida
ARTICLE I * CORPORATE NAME
The name of the Corporation is: HARRI K.K., INC.
ARTICLE II * DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III * PURPOSE

This corporation is organized for the purpose of engaging in any activities of business permitted under the laws of the United States and the State of Florida.

ARTICLE IV * CAPITAL STOCK

The corporation is authorized to issue FIVE HUNDRED shares (500) of ONE____Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares".

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SECREDARY OF STATE

ARTICLE V * INITIAL REGISTERED OFFICE AND AGENT

The principle office, if known, or the mailing address of the corporation is: NAME HARRI KIVIJARVI **ADDRESS** _719 W. PINE STREET_ **CITY** STATE ZIPLANTANA FLORIDA 33462 ARTICLE VI * INITIAL BOARD OF DIRECTORS This corporation shall have ONE_(1) Directors initially. The number of directors may be either increased of diminished from time to time by the By-laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows: NAME HARRI KIVIJARVI **ADDRESS** 719 W. PINE STREET CITY STATE ZIPLANTANA FLORIDA 33462 **NAME ADDRESS CITY** STATE $Z\mathbb{P}$ NAME **ADDRESS** CITY STATE ZIP

ARTICLE VII * INCORPORATORS

The name and address of the Incorpor follows:	ators signing these Articles of Incorporation are as
NAME	
HARRI KIVIJARVI	
ADDRESS	
719 W. PINE STREET_	
CITY	STATE
LANTANA	FL33462
NAME	
ADDRESS	
CITY	STATE ZIP
NAME	/37
ADDRESS	
CITY	STATE ZIP
EXECUTED THESE ARTICLES OF DAY OF MARCH, 2001	willing
set forth above, personally appeared) SS to take acknowledgments in the State and County
known to me and known to be the pers Incorporation, and who acknowledged	son(s) who executed the foregoing Articles of

FILED

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CERTIFICATE AND ACKNOWLEDGMENT OF REGISTERED AGENT

SECRETARY OF COAFE TALLANASSEE, PLORIDA

CERTIFICATE OF REGISTERED

AGENT OF
HARRI K.K., INC.
(NAME OF CORPORATION)
PURSUANT TO FLORIDA STATUTES SECTIONS 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of incorporation
at719 W. PINE STREET
LANTANA, FL. 33462
has named HARRI KIVIJARVI located at the aforesaid address, as its Registered Agent to accept service of process within this statement.
ACKNOWLEDGMENT
Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida law in keeping open said office.
(registered agent)
HARRI KIVIJARVI