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PECIAL INSTRUCTIONS		_

"When you need ACCESS to the world"
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ARTICLES OF INCORPORATION

INTEO INFORMATION CONSULTING SERVICE INC.

ASTORIAN SERVICE STORIES

The undersigned incorporator, 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:

INTEQ INFORMATION CONSULTING SERVICE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 15475 s.w. 74th CIRCLE CT. UNIT 702
MIAMI, FLORIDA 33193

ARTICLE III SHARES

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

2000 SHARES COMMON STOCK PAR VALUE \$ 1.00 per SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

TIEFANG LEI

15475 S.W. 74th CIRCLE CT. UNIT 702

MIAMI, FL 33193

ARTICLE V INCORPORATOR(S)

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

TIEFANG LEI 15475 S.W. 74th CIRCLE CT. UNIT 702 MIAMI, FLORIDA 33193 The name and Post Office Address of the First Board of Directors is(are):

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATURES, 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:

INTEQ INFORMATION CONSULTING
SERVICE INC.

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

Name of agent

15495 S.W. 74th CIRCLE CT. # 702
Address

MIAMI, FLORIDA 33193

City, State Zip

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 furthur 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.

Siganture

Date

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SECRETARY OF STATE
SECRETARY OF STATE