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SECRETAR SEE, FLORIDA

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

SUBJECT: INTERESTATE DEVELOPMENT AT 192, INC.

Enclosed is an original and (1) copy of the articles of incorporation and a check for:

\$87.50 Filing Fee, Certified Copy and Certificate

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FROM: Aristea Lucido

1660 SW 6 AVE

Boca Raton, FL 33486

(561) 347-6696 or fax (561)276-7974

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SECILIA STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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:

INTERSTATE DEVELOPMENT AT 192, INC.

ARTICLE II PRINCIPAL OFFICE

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

1660 SW 6 AVE, BOCA RATON, FL 33486

ARTICLE III PURPOSE

The purpose of this corporation will be to develop the 14.4 acres of land located at 192 and I-95.

ARTICLE IV SHARES

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

10000 SHARES

ARTICLE V INITIAL OFFICERS/DIRECTORS

The names and addresses are:

Michael Lucido

President/Director

1660 SW 6 Ave, Boca Raton, FL

Charles Julian

Vice President/Director

4400 Pinewood Dr, Melbourne, FL

Aristea Lucido

Sec/Treas/Director

1660 SW 6 Ave, Boca Raton, FL

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent is:

ARISTEA LUCIDO 1660 SW 6 AVE.

BOCA RATON, FL 33486

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

MICHAEL LUCIDO 1660 SW 6 AVE. BOCA RATON, FL 33486

Michael Lul
SIGNATURE/INCORPORATOR

115101

DATE

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 further 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.

SIGNATURE/REGISTERED AGENT

DATE