Division of

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l'Iorida 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)205-0381

From:

Account Name

: DAVID SILVERMAN, ESQ.

Account Number : I19990000080

: (305)947-5822

Fax Number

: (954) 456-7957

FLORIDA PROFIT CORPORATION OR P.A.

Ups and Downs Limited, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70,00

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Ups and Downs Limited, Inc.

ARTICLE II PRINCIPAL OFFICE

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

SECRETARY OF STATE DIVISION OF CORPORATIONS

OF JUL 24 AM 10: 59

407 Oakhaven Dr. Altamonte Springs, Fl. 32701

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Barbara McDaniel 407 Oakhaven Dr. Altamonte Springs, Fl. 32701

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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):

Barbara McDaniel 407 Oakhaven Dr. Altamonte Springs, Fl. 32701

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

23 cday of July = 200

x Barbara Mc Daniel
Signature

Notarization is not required.

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ARTICLE VI DIRECTOR(S) OFFICER(S) SHAREHOLDER(S)

The name(s) and street address(es) of the director(s) are:

Barbara McDaniel 407 Oakhaven Dr. Altamonte Springs, Fl. 32701

The name(s) and street addresses of the officer(s) are:

Barbara McDaniel, President 407 Oakhaven Dr. Altamonte Springs, Fl. 32701

The name(s) of the shareholder(s) are:

Barbara McDaniel (100 shares)

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:

Ups and Downs Limited, Inc.

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

Barbara McDaniel 407 Oakhaven Dr. Altamonte Springs, Fl. 32701 BIVISION OF CORPORATIONS

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.

Notarization Is Not Required

erbara Mc Daniel 7/23/01

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