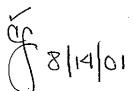
POLOCOTA 148

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

SUE	SJECT:	Chnilo (Proposed corp	vorate name - must include s	ent In	<u>C</u> .
171				00004526 -08/09/010 ******78.75	6171 1023014 *****78.75
Enci	osed is an origin	nal and one(1) copy of the article	es of incorporation and a	check for:	
	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of	
. .	FROM:	LiSO I Name (Pr	ADDITIONAL CO	Status	
	SS ST				Section 200
			ephone number	AH 10: 55 OF STATE E FLORIDA	J

NOTE: Please provide the original and one copy of the articles.



ARTICLES OF INCORPORATION , In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) FILED <u>ARTICLE I</u> The name of the corporation shall be: SECRE TARY OF STATE TALLAHASSEE FLORIDA PRINCIPAL OFFICE The principal place of business/mailing address is: The purpose for which the corporation is organized is: ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): The name and Florida street address registered agent is: The name and address of the Incorporator is: Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Date

gnature/Incorporator