Division of Corporations

Florida Department of State

Division of Corporations

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Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 ber : (305)716-0346 Phone Fax Number

FLORIDA PROFIT CORPORATION OR P.A≅≪

REVERSOS INC.

20 25 25 and 1 and 2 19 Certificate of Status Certified Copy Page Count \$78.75 Estimated Charge

B. McKnight AUG 1 5 2001

ARTICLES OF INCORPORATION OF

REVERSOS INC.

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:

REVERSOS INC.

ARTICLE II PRINCIPAL OFFICE

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

7955 WEST 34th Land Hjaleah, FL 33018

ARTICLE III CAPITAL STOCK

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

FIVE (500) HUNDRED SHARES @ \$1.00/PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

ARMANDO VASQUEZ 7955 WEST 34th LANE HIALEAH, FL 33018

PREPARED BY: QUALITY ACCOUNTING & GENERAL SERVICES CORP. 6535 N.W. 36" STREET, SUITE 328 VIRGINIA GARDEN'S, FL 23 166-6975 (305) 870-9670 OT AUG IS PH 3: 40
-SICKETARY OF STATE

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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):

ARMANDO VASQUEZ 7955 WEST 34th LANE HIALEAH, FL 33018 NUR M. VASQUEZ 7955 WEST 34th LANE HIALEAH, FL 33018

The undersigned has(have) executed these Articles of Incorporation this day				
of	AUGUST	, 2001 .	Yue Va	SQUEZ - P/T/D QUEZ - VP/S/D
	•		Signatur	Tîtle

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1. The name of this corporation is:

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501. 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.

**	REVERSOS INC.
2.	The name and address of the registered agent and office is: ARMANDO VASQUEZ
	(NAME) 7955 WEST 34th LANE
	(P.O. BOX <u>NOT</u> ACCEPTABLE) HIALEAH, FL 33018
	(CITY/STATE/ZIP)
THE CA	AVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR HE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I BEEBY ACCEPT THE APOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS APACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTUES ADAILATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTTES AND I AMAINLIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSOTION AS REGISTERED GENT.
	SIGNATURE
	DATE / 0" 3-U[

Prepared by: Quality accounting & General Services Corp.
6355 N.W. 36* Street, Suite 328
VIRGINIA GARDEN'S, FL 33166-6975
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