OFFICIAL GOLY (Decumit#)

EPRESS CORPORATE FILING SERVICE INC.
(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 101

(Address)

CORAL GABLES, FL 33134 305-444-4994

(City, State, Zip) (Phone #)

OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Walk in Certified Copy Mail out Will wait Photocopy Certificate of Status 400004899524--1 -02/11/02--01054--001 NEW FILINGS AMENDMENTS ****157.50 *****78.75 Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger

OTHER FILINGS

Annual Report

Fictitious Name

Name Reservation

Reinstatement

Trademark

Other

DEPARIMENT OF STATE UIVISION OF CORPOGATI INC TALLAHASSEE, FLORIOA

OS EEB II WII: 30

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Examiner's Initials	

CR2E031(9/92)

ARTICLES OF INCORPORATION

OF

PINES ENRICHMENT CENTER, 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 this corporation shall be:

Pines Enrichment Center, Inc.

02 FEB 11 PM 3: 20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

19411 NW 7th Street Pembroke Pines, Fl. 33029

ARTICLE III CAPITAL STOCK

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

100 shares at \$1.00 par value

ARTICLE IV OFFICERS OF CORPORATION

PRESIDENT VICEPRESIDENT TREASURER SECRETARY Nidia Martinez Andre Martinez Nidia Martinez Nidia Martinez

ARTICLE V REGISTERED AGENT AND ADDRESS

The name and address of the initial Registered Agent is:

Nidia Martinez 19411 NW 7th Street Pembroke Pines, Fl. 33029

ARTICLE VI INCORPORATOR(S)

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

Nidia Martinez

The undersigned has (have) executed these Articles of Incorporation this 2002.

_day of February

xidia Martinez

STATE OF FLORIDA COUNTY OF DADE

I HEREBY CERTIFY that on this	day, before me, an officer duly authorized in the State
aforesaid and in the Court aforesaid, to tal	ke acknowledgments, personally appeared
NICIO MOAINEZ, to me known	to be the person(s) described in and who executed the
foregoing instrument or have produced [Drivers License as
identification and who did take an oath an	d acknowledged before me that they executed the
same.	
WITNESS my hand and official se	eal in the County and State last aforesaid the day of
February, 2002.	
	otharb. Date
	NOTARY PUBLIC,
ARY BUA OFFIGIAL NOTARY BEAL	State of Florida at Large
PATRISIA T MORATA	tatació T. morata
COMMISSION NUMBER	(Print Name)
OF FLOR MY COMMISSION EXPIRES NOV. 9,2005	My Commission Expires:
1107. 3,2005	111912005

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating registered office/registered agent in the State of Florida.

- 1. The name of the corporation is: Pines Enrichment Center, Inc.
- 2. The name and address of the Registered Agent and office is:

Nidia Martinez

19411 NW 7th Street

Pemboke Pines, Fl. 3302

Name Nichar Wartinez

Registered Agent

Date: 2/5/02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I CHEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLETE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND LACCEPT THE DUTIES AND COBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Name Nidia Martinez

Registered Agent