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

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SUBJECT: CONSOLIDATED TOISK MANAGEMENT, INC.

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

97 (S)

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CONSOLIDATED RISK MANAGEMENT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

515 WEST PARK DRIVE #5 MIAMI FLORIDA 33172

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSURANCE SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

VICTORIA D. FERNANDEZ

VALENTINA BOTES

President VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

VICTORIA D. FERNANDEZ 515 WEST PARK DRIVE #5

Mi Ami, R. 33172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VICTORIA D. FERNANDEZ SIS WEST PARK DRIVE #5

MIAMI FL. 33172

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

Signature/Registered Agent

Signature/Incorporator