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02 JUN 10 PM 2: 45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

000005729910--9 -06/11/02--01016--005 *****78.75 *****78.75

SUBJECT: "FELIPE OLEA CORPORATION". (PROPOSED CORPORATE NAME- MUST INCLUDE SUFFIX)

Enclose is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

Filling Fee

Filling Fee

& Certificate of

Status

\$78.75

Filling fee

&Certified Copy

□ \$87.50 Filling Fee

Certified Copy

& Certified of

Status.

ADITIONAL COPY REQUIRED

From:	FELIPE OLEA	
	Name (Printed or Type)	
_	3004 CALDER DR No 236	_
	Address	
-	Jacksonville Beach . FL. 32250	
	City, State & Zip	
	(904)821-0542	
	Daytime Telephone Number	

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

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ARTICLES OF INCORPORATION

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

SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLES I NAME

The name of the corporation shall be:

"FELIPE OLEA CORPORATION".

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3004 CALDER DR NO 236

JACKSONVILLE BEACH . FL. 32250.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

General Constructions Residential and comercial and any other transact or lawful activities permitted under lwas of the United States and Florida state

ARTICLES IV SHARES

The number of shares of stock is:

One thousand Shares of common stock at non par value.

ARTICLES V INITIAL OFFICER/ DIRECTORS (Optional)

The name(s) and Address(es):

Felipe Olea

President

3004 Calder Dr. No 236

Jacksonville Beach, FL. 32250

ARTICLES VI REGISTERED AGENT

The name and address of the registered Agent is:.

Felipe Olea

3004 Calder Dr No 236

Jacksonville Beach. Fl. 32250

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Felipe Olea

3004 Calder Dr No 236 Jaksonville Beach. FL 32250

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SECRETARY OF STATE TALLAHASSEE FLORIDA
TASSEE FLORIDA

Having been named agent to accept services of process for the above stated corportaion at the place designate in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Felipe Olog Signature/Registered Agent	6-5-02	
Signature/Registered Agent	Date	
X Falipe Olea Signature /Incorporator	6-5-02	
Signature /Incorporator	Date	