TRANSMITTAL LETTER

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

*****78.75 *****78.75

STARSILICON, CORP. SUBJECT: _

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles 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

Status

ADDITIONAL COPY REQUIRED

RAMON REYES FROM: Name (Printed or typed) 5035 PALM AVE. Address HIALEAH, FL. 33012 City, State & Zip (305)822-0669 Daytime Telephone number

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby SEE, FLORID adopts the following Articles of Incorporation. 02 SEP 27 PM 3: 32

ARTICLE I NAME

The name of the corporation shall be:

STARSILICON, CORP.

ARTICLE II PRINCIPAL OFFICE

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

421 FOUNTAINHEAD CIRCLE #110 KISSIMMEE, FL. 34741

ARTICLE III SHARES

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

10,000 Common Shares

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:

FEDERICO DURAN SOTO

421 FOUNTAINHEAD CIRCLE #110 KISSIMMEE, FL. 34741

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

PRESIDENT/ SECRETARY FEDERICO DURAN SOTO

421 FOUNTAINHEAD CR. #110

KISSIMMEE, FL. 34741

Foderico Duran		9/16/02
Signature/Incorporator	7.6	Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

9/16/02 Date Signature/Registered Agent