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TRANSMITTAL LETTER

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

SUBJECT: H	IA DESERT LIMITED, INC.				
	(Proposed corpo	(Proposed corporate name - must include suffix)			
Enclosed is an or	iginal and one(1) copy of the article	es of incorporation and a	check for:		
፟ \$70.0 Filing Fe	• •	☐\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FI O	M: DENNIS ROYER Name (P	rinted or typed)			
	SAN ANTONIO, TEXAS	Address 18240 87042 State & Zip			
	(505) 869-2924 Daytime T	elephone 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 adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

HIA DESERT LIMITED, INC.

ARTICLE II PRINCIPAL OFFICE

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

10227 PEMCREST DRIVE SAN ANTONIO, TX 78240



ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 50,000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MICHAEL O'HALLORAN 3569 WEBBER STREET SARASOTA, FL 34234

ARTICLE V INCORPORATOR

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

DENNIS ROYER 10227 PEMCREST DRIVE SAN ANTONIO, TX 78240

Signature/Incorporator

Data

(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

Signature/Registered Agent

Date