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Division of Corporations

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Account Name : HUBCO  
Account Number : 104662003400  
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**FLORIDA PROFIT CORPORATION OR P.A.**

**Induwinser Corporation**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

*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 the corporation shall be:

**Induwinser Corporation**

### ARTICLE II PRINCIPAL OFFICE

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

**Induwinser Corporation**

**7547 Sand Lake Pointe Loop #308**

**Orlando, FL 32809**

### ARTICLE III SHARES

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

**200 Shares at No Par Value**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**David Aragon**

**7547 Sand Lake Pointe Loop #308**

**Orlando, FL 32809**

***Prepared By:***

**Bruce B. Hubbard**

**77 East John St.**

**Hicksville, New York 11801**

**1-516-935-8940**

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ARTICLES V INCORPORATOR(S)

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

**Maria Ines Soto Olaya**  
**7547 Sand Lake Pointe Loop # 308**  
**Orlando, FL 32809**

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20th day of November 2002.

  
\_\_\_\_\_  
Maria Ines Soto Olaya - Signature

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Induwinser Corporation**

2. The name and address of the registered agent and office is:

**David Aragon**

Name

**7547 Sand Lake Pointe Loop #308**

(P.O. Box or Mail Drop Box NOT Acceptable)

**Orlando, FL 32809**

(City / State / Zip)

*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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

  
David Aragon  
SIGNATURE

**November 20th, 2002**  
(Date)

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