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Profit	Amendment		
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Domestication	Dissolution/Withdrawal		
Other	Merger		
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OTHER FILINGS	REGISTRATION/		
Annual Report	QUALIFICATION Foreign		
Fictitious Name	Limited Partnership	-	
Name Reservation	Reinstatement	-	
	Trademark	1	
	Other	Francisco Pa Initiale	

Examiner's Initials

### 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:

Broken Frontier INC:

03 APR -1 AM 9:51

JULICIPAL OF STATE

AND ASSEE, FLORIDA

### ARTICLE II - PRINCIPAL OFFICE

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

12749 SW. 64 Terrace Miani, Florida 33183

### ARTICLE III - SHARES

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

ONE HUNdrad

# ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ALBERTO Luis DEZA 12749 S.W. 64 Terrace MIAMI, Florida 33183

# ARTICLE V - INCORPORATOR

NICOMON MOSS,

The name and street address of the incorporator to these Articles of
Incorporation is: ALGENTO LUIS DEZO
127/10 LUIS DEZA
12747 S.W GUTENICOLO
Minus
Miami, Florida, 33183
The understand in annual to the state of the
the undersigned incorporator has executed these Articles of
The undersigned incorporator has executed these Articles of Incorporation this 31 day of Mgvch 2003
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## ARTICLE VI- DIRECTOR(S)

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

ALBERTO Luis DEZa. Prasident 12749 S.W. 64 Terraca Miami, Florida 33183

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent,

Registered Agent Signature