Page 1 of 2

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Florida Department of State

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FLORIDA PROFIT CORPORATION OR P.A.

ODEZ INVESTMENTS CORP.

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p.2

03 APR 15 PM 2: 34

SECILE STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION of ODEZ Investments Corp.

ARTICLE I. NAME

The name of this corporation is ODEZ Investments Corp.

ARTICLE IL NATURE OF BUSINESS

ODEZ Investments Corp., is organized for the purpose of transacting any lawful business for which corporations may be formed in Florida.

ARTICLE III, TERM OF EXISTENCE

The duration of ODEZ Investments Corp., is perpetual.

ARTICLE IV, CAPITAL STOCK

ODEZ Investments Corp., is authorized to issue 100 shares of common stock, par value \$1.00 per share.

ARTICLE V. ADDRESS

The principle address of ODEZ Investments Corp., is:

8911 Collins Avenue, Unit 704 Surfside, FL 33154

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ARTICLE VI. INITIAL DIRECTORS

<u>ODEZ Investments Corp.</u>, shall have one (1) director, and the number of directors may be changed as provided in the bylaws, but shall never be less than one. The name and address of the initial director is:

Omar Hernandez 8911 Collins Avenue, Unit 704 Surfside, FL 33154 President/Secretary/Treasurer/Director

ARTICLE VIL INCORPORATOR

The name and addresses of the incorporator of this corporation are:

Omar Hernandez 8911 Collins Avenue, Unit 704 Surfside, FL 33154

Omar Hernandez

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ACCEPTANCE OF APPOINTMENT

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03 APR 15 PM 2: 34

OF.

REGISTERED AGENT

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 designating the registered office/registered agent, in the state of Florida.

1.	The name of the corporation is:	ODEZ Investments Corp.

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

Omar Hernandez 8911 Collins Avenue, Unit 704 Surfside, FL 33154

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 THE CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION 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

DATE