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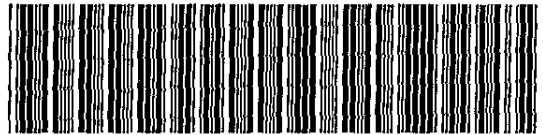
(Business Entity Name)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 MAY 14 AM 9:55

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5-22-02

## TRANSMITTAL LETTER

MAY 8, 2003

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P.O. Box 6327  
TALLAHASSEE, FL 32314

SUBJECT: IRENE GRACE, INC. —

ENCLOSED IS AN ORIGINAL AND ONE COPY OF THE ARTICLES OF  
INCORPORATION AND A CHECK FOR \$87.50.

PLEASE INCORPORATE THE COMPANY.

THANKS YOU FOR YOUR ASSISTANCE.

FROM :

IRENE SOTO  
14410 79<sup>TH</sup> CT No.,  
LOXAHACHEE, FL 33470

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 MAY 14 AM 9:55

**ARTICLES OF INCORPORATION**  
**OF**  
**IRENE GRACE, INC.**

THE UNDERSIGNED ACTING AS THE INCORPORATOR OF A CORPORATION UNDER  
THE FLORIDA BUSINESS CORPORATIONS ACT, ADOPTS THE FOLLOWING  
ARTICLES OF INCORPORATION.

**ARTICLE I**  
**NAME**

THE NAME OF THE CORPORATION SHALL BE:

IRENE GRACE, INC.

**ARTICLE II**  
**PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

14410 79<sup>TH</sup> COURT NO.  
LOXAHATCHEE, FL 33470

**ARTICLE III**  
**PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED IS:

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED  
UNDER THE LAWS OF THE UNITED STATES AND OF THE STATE OF FLORIDA.

**ARTICLE IV**  
**SHARES**

THE NUMBER OF SHARES OF CAPITAL STOCK IS :

ONE THOUSAND (1000) SHARES OF COMMON STOCK HAVING A PAR VALUE OF  
ONE (\$1) EACH

**ARTICLE V**  
**INITIAL OFFICERS/DIRECTORS**

THE NAME(S) AND ADDRESS(ES) :

IRENE SOTO  
DIRECTOR & PRESIDENT  
14410 79<sup>TH</sup> CT No.,  
LOXAHATCHEE, FL 33470

**ARTICLE VI**  
**REGISTERED AGENT**

THE NAME AND FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS :

IRENE SOTO  
14410 79<sup>TH</sup> CT No.,  
LOXAHATCHEE, FL 33470

**ARTICLE VII**  
**INCORPORATOR**

THE NAME AND ADDRESS OF THE INCORPORATOR IS :

**IRENE SOTO**  
**14410 79<sup>TH</sup> CT No.,**  
**LOXAHATCHEE, FL 33470**

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE NAMED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Irene Soto

SIGNATURE / REGISTERED AGENT

DATE

5/9/03

Irene Soto

SIGNATURE / INCORPORATOR

DATE

5/9/03