

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone : (305)599-0839

Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

JDR PROFESSIONAL SERVICES, INC.

Certificate of Status	0
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5/30/2003

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I

The initial name and address of this corporation shall be:

JDR PROFESSIONAL SERVICES, INC. 852 SW 134 PLACE MIAMI, FL 33184

ARTICLE!

This corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE III

The capital stack euthorized, the par value thereof, and the characteristics of such stack shall be as follows:

Number of Shares <u>Authorized</u>	Par Value Per Shara	Class of Stock
600	\$1,00	Common

ARTICLE IV

The name and address of the initial registered agent is:

Mirlam Amorin 852 SW 134 PLACE MIAMI, FL 23184

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ARTICLE V

The name and street address of the incorporator to this Articles of Incorporation is:

MIRIAM AMORIN - President

852 SW 134 PLACE MIAMI, FL 33184

The undersigned incorporator have executed these Articles of Incorporation

this 2/ day of MAY, 2003

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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.

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1. The Name of the corporation:	7*:		
JDR PROFESSIONAL SERVICES, INC.		Y 30	
2. The name and address of the registered agent and office is:	شد استان بیری ایشیر مهمد راه	<u>?</u> ≛ &	
MIRIAM AMORIN	المسلوبية المستوار المارات المستوار	2	
852 SW 134 PLACE			
MIAMI, FL 33184			

Signature MM and Culvain

Title PRESIDENT

Date 5/23/03

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Signature _	M man	Cicurum
Date	5/22/0	3