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TO:

Division of Corporations

Fax Number

(850)205-0381 .

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : 120000000257 : (850)224~8870 Phon€

: (850)224-7047 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

MagnaVenture Enterprises, Inc.

| Certificate of Status | 0 |
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Capital Connection, Inc.

CAPITAL CONNECTION

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ARTICLES OF INCORPORATION OF



MagnaVenture Enterprises, Inc.

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

ARTICLE I: NAME

The name of the corporation is MagnaVentures Enterprises, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 1401 Ashbourne Way, Deltona Beach, FL 32725.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one million (1,000,000) shares having a par value of (\$.01).

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ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Richard Scott Draughn, 814 A1A North, Suite 307A, Ponte Vedra Beach, FL 32082.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: OFFICERS AND DIRECTORS

The name and address of the initial Board of Directors is President/ Vice-President/ Secretary/ Treasurer/ Director: Roger Watson, 1401 Ashbourne Way, Deltona, FL 32725.

The undersigned has executed these Articles of Incorporation this 29th day of August 2003. Your Capital Connection, Inc., by Stacey Leggett, Client Representative

Storey Leggett

CAPITAL CONNECTION

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CERTIFICATE OF DESIGNATION

FILED
33 AUG 29 AM 8: 21
SECRETARYSEF, FLAM

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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: | MagnaVentu | re Enterpris | ises, Inc. | |
|---|----------------|----------------|------------|--|
| | | \ | | |
| | ••• | | | |
| 2. The name and street address of the | assistand some | and adding its | | |
| 2. The name and succe accress of the Richard Scott Draugho | | and office is. | | |
| 814 A1A North, Suite | 307A Ponte | Vedra Beach | , FL 32082 | |
| | | 7 | | |

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS POR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HERBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS 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.