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SECRETARY OF STATE ALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation and	a check for:	
\$70.00	□ \$78.75	\$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
1 1	& Certificate of Status	& Certified Copy	Certified Copy	
		G SG MARGO Suppy	& Certificate of	
		J	Status	
	. 1	ADDITIONAL COPY REQUIRED		
FROM: J.C. HUDSON				
Name (Printed or typed) Name (Printed or typed) Name (Printed or typed) Address				
LAIZELAND FLOGIDA 33810				
	813-116-6	270 I		
Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

AVIATRIX INTERNATIONAL COLPOR	ATTON
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
4-85 NORTH VOLUSIA AVE., ORANGE CITY	1,FL3276
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
FINANCIAL SERVICES	•
ARTICLE IV SHARES The number of shares of stock is:	03 TALL
2,000,000	FILED 03 OCT 20 PM SECRETARY OF ALLAHASSEE, J
ARTICLE V' INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	FILED 20 PH TARY O ASSEE,
	4 3: 47 F STATE FLORIDA
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: SANDEA A THOMPSON, ESQ. 485 NORTH VOLUSIA AVE., ORANGE CITY	FC 3276
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is: SOW, ESQ.	20 0 C
485 NORTH VOLUSIA AVE, DUANCECITYS	PL 52765
Having been named as registered agent to accept service of process for the above stated corporation at the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacit	e place designated in this
SHNDRA THOMPSON Signature/Registered Agent	<u> </u>
SANDRA THOMPSON Signature/Incorporator	Date

ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation shall be:

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)