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TRANSMITTAL LETTER

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

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00

J \$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$78.75

Filing Fee & Certified Copy **F**\$87.50

Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: DSWALOO AG WIRRE

Name (Printed or typed)

4964 NW 57457

Address

ARTICLES OF INCORPORATION OF OSWALDO AGUIRRE CORPORATION INC.

THE UNDERSIGNED INCORPORATOR, FOR THE PURPOSE OF FORMING A CORPORATION—UNDER THE FLORIDA BUSSINESS CORPORARION ACT, HEREBY ADOPTS THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE 1

THE NAME OF THE CORPORATION SHALL BE: OSWALDO AGUIRRE CORPORATION INC.

ARTICLE 11

THE PRINCIPAL PLACE OF BUSSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE: 4964 NW 5TH ST DELRAY BEACH FL. 33445

ARTICLE 111 CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK THE CORPORATION SHALL BE AUTHORIZED TO CREATE AND ISSUE IS 1,000 SHARES OF COMMON STOCK HAVING A ZERO PAR VALUE PER SHARE.

ARTICLE IV

INITIAL REGISTERED AGENTS AND OFFICERS THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENTS ARE: OSWALDO AGUIRRE GARCIA 4964 NW 5TH ST DELRAY BEACH FL. 33445 AND MELISSA ANN AGUIRRE 4964 NW 5TH DELRAY BEACH FL. 33445.

ARTICLE V INCORPORATORS

THE NAME AND STREET ADDRESS OF THE INCORPORATORS TO THESE ARTICLE OF INCORPORATION TO THESE ARTICLE OF INCORPORATION ARE: OSWALDO AGUIRRE GARCIA 4964 NW 5TH ST DELRAY BEACH FL. 33445 AND MELISSA ANN AGUIRRE 4964 NW 5^{TH ST} DELRAY BEACH FL. 33445.

ARTICLE VI BOARD OF DIRECTORS

THE POWER OF THE CORPORATION SHALL BE EXERCISED BY OR UNDER THE AUTHORITY OF, AND THE BUSSINESS AND AFFAIRS OF THE CORPORATION SHALL BE MANAGED UNDER THE DIRECTION OF, A BOARD OF DIRECTORS .THE NUMBER OF DIRECTORS MAY BE INCREASED OR DECREASED BY THE SHAREHOLDERS FROM TIME TO TIME AS PROVIDED IN THE BYLAWS OF THE CORPORATION.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE NAMES AND STREET ADDRESS OF THE INITIAL DIRECTORS WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESOR IS ELECTED, ARE: OSWALDO AGUIRRE AND MELISSA ANN AGUIRRE 4964 NW 5TH ST DELRAY BEACH FL. 33445.

ARTICLE VII

THE CORPORATION MAY ENGAGE IN OR TRANSACT ANY OR ALL LAWFULL ACTIVITIES OR BUSSINESS PERMITED UNDER THE LAWS OF LAWS OF THE UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER STATE, COUNTY, TERRITORY OR NATION.

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATORS HAVE MADE AND SUBSCRIBED THESE ARTICLES OF INCORPORATION AT LAKE WORTH FLORIDA USA.

INCORPORATOR

Uswalda K. INCORPORATOR

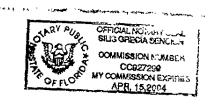
STATE OF FLORIDA) COUNTY OF PALM BEACH)

BEFORE ME PERSONALLY APPEARED, OSWALDO AGUIRRE AND MELISSA ANN AGUIRRE TO ME KNOWN TO BE THE PERSON DESCRIBED AND WHO PRODUCED FLORIDA DRIVER LICENSE# A 262 640 77-041-0 AND DL# A 260 541-757970 AS IDENTIFICATION AND DID NOT TAKE AN OATH AND WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION AND WHO FREELY AND VOLUNTARY ACKNOWLEDGED BEFORE ME ACCORDING TO LAW THAT THEY MADE AND EXECUTED THE SAME FOR THE USES AND PURPOSES THEREIN MENTIONED AND SET FORTH.

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND OFFICIAL SEAL AT LAKE WORTH FLORIDA THIS November 13, 2003

TARY PUBLIC OF FLORIDA

SILIS GRECIA SENCION MY COMISSION EXPIRES: APRIL 15, 2004



CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

PERSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZER UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, I THE STATE OF FLORIDA.

1-THE NAME OF THE CORPORATION IS, OSWALDO AGUIRRE CORPORATION INC.

2- THE NAME AND ADDRESS OF THE REGISTERED AGENT IS OSWALDO AND MELISSA ANN AGUIRRE 4964 NW 5TH ST DELRAY BEACH FL. 33445.

Swaczo K.

TITLE: INCORPORATOR

DATE: November 13, 2003

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 AGREEE 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.

DATE: NOV. 13 - 3003