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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : ACE INDUSTRIES, INC.
Account Number : 070744001530
Phone : (305) 358-2571
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

PIVOT PROVALIM IMPORT/EXPORT, INC.

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Articles of Incorporation

Article 1: Name of Corporation: **PIVOT PROVALIM IMPORT/EXPORT, INC.**

Address of Corporation: **1849 PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL. 34952**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **1,000**, with a par value of **0**.

Article 3: REGISTERED AGENT: **HUGHES DURANDISSE**

REGISTERED OFFICE: **490 S.E. THANKSGIVING AVE.
PORT ST. LUCIE, FL. 34984**

*I am familiar with and hereby accept the duties and responsibilities as Register Agent for said corporation.



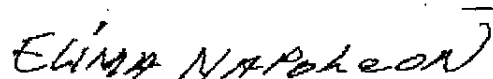
Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).
First listed is President, Second is Vice President, then Secretary/Treasurer.

1. P: **M. HUGHES DURANDISSE, 490 S.E. THANKSGIVING AVE., PORT ST. LUCIE, FL. 34984**
2. VP EXECUTIVE: **M. PRESLER PAUL, 490 S.E. THANKSGIVING AVE., PORT LUCIE, FL. 34984**
3. VP: **MME. MAINA CLEMENTE BARE, 490 S.E. THANKSGIVING AVE., PORT LUCIE, FL. 34984**
4. DIRECTOR GENERAL: **M. ROOSEVELT LEREBOURS, 490 S.E. THANKSGIVING AVE., PORT LUCIE, FL. 34984**
5. SECRETARY: **M. FRED MANIGAT, 490 S.E. THANKSGIVING AVE., PORT LUCIE, FL. 34984**

Article 5: The NAME and ADDRESS of the INCORPORATOR is:
**ELIMA NAPOLEON
490 S.E. THANKSGIVING
PT. LUCIE, FL. 34984**

In witness whereof, I have subscribed my name:



Signature of Incorporator

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