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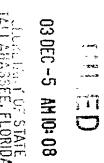
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TRANSMITTAL LETTER

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

(2.		
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:	
□ \$70.00 □ \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: Robert Reilly C	LO BARCOS A (Printed or typed)	ccounting	
18/01 Placida Rd # 201 Address			
Englewood,	F1. 3422 State & Zip	3	
941-475-541 Daytime To	elephone number		

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

FILED

03 DEC -5 AM 10: 08

ARTICLES OF INCORPORATION DEBITE LARY OF STATE TALLARASSEE, FLORIDA

LITCHFIELD VENTURE INC.

The undersigned subscribers to these Articles of Incorporation, natural persons competent to contract, hereby form corporation under the laws of the State of Florida.

ARTICLE I – CORPORATE NAME

The name of the corporation is: Litchfield Venture Inc.

ARTICLE II- CORPORATE ADDRESS

The corporate address is: 4640 Pompano Street, Placida, Fl. 33946

The mailing address is: 4640 Pompano Street, Placida, Fl. 33946

ARTICLE III-PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE IV- SHARES

The corporation is authorized to issue one thousand shares (1,000) of one Dollar (\$1.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V- INITIAL OFFICERS AND/OR DIRECTORS

This corporation shall have 3 officers/directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The name and address of the initial directors of the corporation are as follows:

NAME: Brian Reilly

ADDRESS: 212 Carriage Trail CITY: Raleigh, N.C. 27614

NAME: John Reilly

ADDRESS: 99 Walnut Road CITY: Glen Cove, N.Y. 11542

NAME: Robert Reilly

ADDRESS: 4640 Pompano St. CITY: Placida, Fl. 33946

ARTICLE VI- INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agent of this Corporation is:

NAME: Randy C. MacLeod

ADDRESS: C/O Barco's Accounting

1861 Placida Rd. Ste 201

CITY: Englewood, Fl. 34223

ARTICLE VII-INCORPORATOR

The name and address of the person signing these Articles of Incorporation are as follows:

NAME: Robert Reilly

ADDRESS: 4640 Pompano St.

CITY: Placida, Fl. 33946

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this Thursday, December 04, 2003.

Robert Reilly

STATE OF FLORIDA COUNTY OF CHARLOTTE

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared Robert Reilly known to me and known to be the person who executed the foregoing Articles of Incorporation, and who acknowledged before me that he executed the Articles of Incorporation. IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this Thursday, December 4,2003.

(Notary Public, State of Florida at Large)

SHARON K, BARCO

Notary Public - State of Florida

My Commission Expires Apr 29, 2004

Commission # CC919681

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT OF LITCHFIELD VENTURE INC.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Randy C. MacLeod

03 DEC -5 AH IO: 08
SECKLINKS OF STATE