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LAZARUS CORPORATE FI	LING SERVICE
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CORPORATION NAME(S) &	DOCUMENT NUMBER(S) (if known):
1 INTEGRAL	SERVICES USA - CHILE
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Other

Examiner's Initials

## ARTICLES OF INCORPORATION FILED

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby 5: 39 adopt(s) the following Articles of Incorporation.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE I - NAME

The name of the corporation shall be:

INTEGRAL SERVICES USA-CHILE CORPORATION.

#### <u>ARTICLE II - PRINCIPAL OFFICE</u>

The principal place of business and mailing of this corporation shall be:

999 SOUTH BAY SHORE PRIVE, ABT. 302, MIAMI, FLORIDA, 33/3/

#### **ARTICLE III - SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000 SHARES.

### ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CLAUDIO GIACAMAN 999 SOUTH BAY SHORE, ABT. 302 MIAMI, FLORIDA, 33131

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#### ARTICLE V - INCORPORATOR

SECRETARY OF STATE
The name and street address of the incorporator to these Articles of the Incorporation is: CLAUDIO CHACAMAN

999 SOUTH BAY SHORE PRIVE ABT. 302

MIAMI, FLORIDA, 33/3/
The undersigned incorporator has executed these Articles of Incorporation this \_\_\_\_\_ day of \_\_\_\_\_\_ 20\_\_\_

**ARTICLE VI- DIRECTOR(S)** 

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

IAN DAG MARTINSON - PRESIDENT CLAUDIO FEDERICO VON KRETSCHMANN - VICE PRESIDENT GLENN JIM MARTINSON - TREASURE CLAUDIO GIACAMAN - SECRETARY DIRECTOR

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature