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TRANSMITTAL LETTER

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

SUBJECT:	(PROPOSED CORPORAT			
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for:	
□ \$70.00 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 DIR	Printed or typed)		o de la companya de
	2740 Busin	IESS CONTEN	Burb, U	ランサン
	MESONNE, City,	VL 3294 State & Zip	<u>.</u>	♣ .
		- 8838 elephone number		د <u>ست</u> - ا

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

ARTICLES OF INCORPORATION

of

Construction DIPENTA (name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME The name of the corporation is: DIPENTA ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. 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. ARTICLE IV - CAPITAL STOCK The corporation is authorized to issue 1,000 shares of common stock, par value \$ 1.00 per share. ARTICLE V - INITIAL PRINCIPAL OFFICE The street address of the initial principal office and, if different, the mailing address is: STREET ADDRESS 2740 BUSINESS BLUD. ZIP 32940 CITY MELBOURNE **FLORIDA** Mailing address, if different STREET ADDRESS SAME

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

FLORIDA

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	ROBERT DIPENTA			
ADDRESS	2740 Business	CENTER BLVD.	UN.T #2	
CITY	MEUBONRNZ	FLORIDA	ZIP 32940	

CITY

ZIP

	ARTICLE VII - IN	ITIAL BOARD O	F DIRECTO	RS	
or diminished fro	m time to time by the E	By-Laws; but shall i	ctors initially. never be less t	The number of dir han one (1). The n	ectors may be ames and
initial director(s)	of the corporation are a	as follows:			
ROBBUT	DIBENTA	· · · · · · · · · · · · · · · · · · ·			
2740 -	Business	CENTER	BLVD.	UNT #2	
MERON	ane	STATE	F	ZIP	32940
		· .			•
		STATE		ZIP	-
		STATE		ZIP	
	ARTICLE	VIII - INCORPOR	RATORS		
addresses of the in				as follows:	
DIRECT	T.Denta		<u>-</u>		
2740	P. 15. NESS	CENTRO	P N	II also M	<u> </u>
115-20	SUSTREAS	STATE	5000	ZIP	329AD
MCCLBO	W4.10				3-70
					
		STATE		ZIP	
			······································		
	- Alvertain	STATE		7IP	
**					<u>-</u>
				S	
1 C DICLIVIA	107		ana l		
	v	1/N	//(L)		Signature)
	addresses of the in Parks	ration shall have	Tation shall have	Tration shall have	ROBERT DIRENTA 2740 BUSINESS CENTER BUND, UNT 22 MEROMANE STATE ZIP STATE ZIP ARTICLE VIII - INCORPORATORS addresses of the incorporators signing these Articles of Incorporation are as follows: RUBERT DIPENTA 2740 BUSINESS CENTER BUDD, UNIT 2 MEROMANE STATE ZIP STATE ZIP STATE ZIP STATE ZIP ed incorporator(s) have executed these Articles of Incorporation this 25 TE TEBRUMAY 18 2004 M. H. M. M. A.

____ (Signature)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

(name of corporation)
Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, organized under the laws of the State of Florida with its registered office
as indicated in the Articles of Incorporation at 2740 Business Censer Budi, unit *2
MELBOURNE, FZ 32940
has named ROBERT DIPERTA
located at the aforesaid address, as its registered agent to accept service of process within this state.
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 regis-
tered agent and agree 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 and familiar with
and accept the obligations of my position as registered agent.
A A M L AA