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From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

# FLORIDA PROFIT CORPORATION OR P.A.

## KING'S CREEK TRAINING CORP.

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#### ARTICLES OF INCORPORATION

OF

## King's Creek Training Corp.

The Undersigned incorporator, for the purpose of forming a Corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of the Corporation shall be:

King's Creek Training Corp.

SECRETARY OF STATE OF CHIPOLATICS

#### ARTICLE II PRINCIPAL OFFICE

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

1200 SW 90th Ave. Miami, Florida 33174

# ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any time and the Distribution is as follow:

100 SHARES

1.00 Each

'Ulises Garcia

100 SHARES

### ARTICLE IV INCORPORATORS

The name and street address of the incorporators to these Articles of Incorporation is as follow:

Ulises Garcia 1200 SW 90<sup>th</sup> Ave Miami, Florida 33174

The undersigned have executed these Articles of Incorporation this 15 Days of March 2004.

PRESIDENT/INCORPORATOR
Ulises Garcia

### ARTICLE V BUSINESS ACTIVITY

The Company will participate in all legally Business Activity.

## CERTIFICATE OF DESIGNATION

## REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statues, the Undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is:

King's Creek Training Corp.

The Name and Address of the registered agent and office is:

Ulises Garcia 1200 SW 90th Ave. Miami, Florida 33174

Signature

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCEDURE FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREED TO ACT IN THIS CAPACITY. TO THE PROPER AND COMPLETE PERFORMANCE OF DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERD AGENT.