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Domestication	Dissolution/Withdrawal	
Other	Merger	
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OTHER FILINGS	REGISTRATION/ QUALIFICATION	
Annual Report	Foreign	MCGROSSIA AND STATE OF THE STAT
Fictitious Name	Limited Partnership)
Name Reservation	Reinstatement	
	Trademark	
	Other	

Examiner's Initials

CR2E031(9/92)

ARTICLES OF INCORPORATION FILED

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby 11: 55 adopt(s) the following Articles of Incorporation.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I - NAME

The name of the corporation shall be:

JD 5 HANDS SERVICES INC.

ARTICLE II - PRINCIPAL OFFICE

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

1440 J.F Kennedy CAUSEWay SuiTe 309 North Bay Village Fl 33141

ARTICLE III -SHARES

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

100 SHARES

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JUAN D SALDANIAGA 1533 ADVENTURE AUE NORTH BAY VILLAGE FL33141

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ARTICLE V - INCORPORATOR

ARTICLE V - INCORPORATOR

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The name and street address of the incorporator to these Articles of incorporation is: JUAN D SALDARIAGA 7533 ADVENTURE AUG The undersigned incorporator has executed these Articles of Incorporation this 21 day of 1904 2004

ARTICLE VI- DIRECTOR(S)

←Signature

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

TUAN D SALBARIAGA (President)

7533 ADVENTURE AUE

NORTH BAY VIIIAGE F-[3314]

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