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TRANSMITTAL LETTER

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

SUBJECT:	PROEVENT TRANSLATION SERVICES, INC.			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:	
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:		AN C PIREZ (Printed or typed)		
	6401 WESTGATE DRIVE # 407			
	ORLANDO, FLORIDA 32835			
	City, State & Zip 321-274-3223			
	Daytime Telephone number			

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

- The name of the corporation shall be: PROEVENT TRANSLATION SERVICES INC FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 6401 WESTGATE DRIVE # 407 ORLANDO, FL 32835

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TRANSLATION/CONFERENCES PLANERS/AUDIO VISUALS SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JUAN C PIREZ PRESIDENT
6401 WESTGATE DRIVE # 407

ORLANDO, FL 32835

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JUAN C PIREZ 6401 WESTGATE DRIVE # 407 ORLANDO, FL 32835

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

JUAN C PIREZ 6401 WESTGATE DRIVE # 407 ORLANDO, FL 32835

*****************	*************
Having been named as registered agent to accept service of process fo certificate, I am fomiliar with and accept the appointment as registered	
Leuton 18	06/04/2004
Signature/Registered Agent	Date
Signature/Incorporator	