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To:

Division of Corporations

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From:

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

Account Number: 071001002335. Phone: (305)599-0839

Phone : (305)599-0839 Fax Number : (305)716-0346 THE CONTRACTOR STATE

FLORIDA PROFIT CORPORATION OR P.A.

ORIVENCA, CORP.

Certificate of Status	6
Certified Copy	1
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17/22/

ARTICLES OF INCORPORATION OF ORIVENCA, CORP.

The undersigned incorporator for the purpose of forming a COTPORATION under the Florida Business Corporation Act, hereby adopts the following Articles of INCOTPORATION.

ARTICLE 1 NAME

The name of this corporation is ORIVENCA, CORP.

ARTICLE II PRINCIPAL OFFICE

The principal physical and mailing address of this corporation shall be:

4156 Inverrary Dr. # 401 Lauderhill, FL 33319-4538

ARTICLE III SHARES

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

1000 shares of \$1.00 per value common stock

ARTICLE IV INITIAL BOARD OF DIRECTORS

This corporation shall have two (2) directors initially: The number of directors may be increased or diminished from time to time in accordance with by-laws adopted by the stockholders. The names and addresses of the initial board of directors are:

NAME	ADDRESS
Arantza H. Arrue	4156 Inverrary Dr. # 401
President, Secretary	Lauderhill, FL 33319-4538
Javier A. Marval	4156 Inverrary Dr. # 401
V.P., Treasurer	Lauderhill, FL 33319-4538



The name and Florida street address of the initial registered agent are:

Arantza H. AIIU8 4156 Inverrary Dr. # 401 Lauderhill, FL 33319-4538

ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Arantza H. Arrue 4156 Inverrary Dr. # 401 Lauderhill, FL 33319-4538

Arantza II. Arrue

July 21st 2004 Date

ACKNOWLEDGMENT:

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 registered 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 am familiar with and accept the obligations of my position as registered agent.

Arantza H. Axrue

UNU 22 P. 2-5
CRETARY OF STATE