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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305) 633-9696

FLORIDA PROFIT CORPORATION OR P.A.

aklile properties phase I, inc.

| Certificate of Status | 0 |
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ARTICLES OF INCORPORATION OF AKLILE PROPERTIES PHASE I, INC.

ARTICLEI

The name of the corporation shall be: AKLILE PROPERTIES PHASE I, INC.

ARTICLE II

The principal place of business/mailing address is: 20 NW 181st Street, Miami, FL 33169

ARTICLE III

The purpose for which the corporation is organized is: Any and all legal purposes.

ARTICLEIV

The number of shares of stock is:

1,000,000 shares at \$1.00 par value.

ARTICLE V

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

Dr. Joseph P. D'Angelo, President and Director

ARTICLE VI

The name and Florida street address of the registered agent is: Karen E. Trefzger, Esq. 20 NW 181* Street Miami, FL 33169

ARTICLE VII

The name and address of the Incorporator is: Karen E. Trefzger, Esq. 20 NW 181" Street
Miami, FL 33169

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 77th day of _________, 2004.

June John E. Trefzger, Incorporator

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 607.0501 or 617.0501. Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the corporation is:

AKLILE PROPERTIES PHASE I, INC.

2. The name and address of the registered agent and office is:

Karen E. Trefzger, Esq. 20 NW 181 Street Miumi, FL 33169

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.

Dated Rugest / 7/2 2004

Karen E. Treizper, Registered Agent

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