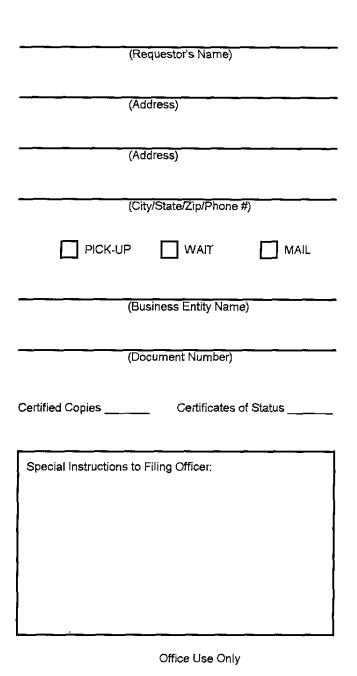
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LEAHASSEE, FLORIDA



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LAZARUS CORPORATE FILING SERVICE	
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	OPPROPER VIEW OFFICE
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CORPORATION NAME(S) & DOCUMENT NUM	BER(S) (if known):
1 FRMAGON CORP	
(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3	
(Corporation Name) 4.	(Document #)
(Corporation Nama)	(Document #)
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NEW FILINGS AMENDM	
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Annual Report Foreign	
Fictitious Name Limited Partnersl	hip
Name Reservation Reinstatement	
Trademark	
Other .	Examiner's Initials

ARTICLES OF INCORPORATION

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

ARTICLE I - NAME

The name of the corporation shall be:

ERMAGON CORP.

04 OCT 29 AM 7: 46
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

ARTICLE II - PRINCIPAL OFFICE

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

1090 MEADOWCARK AUE. MAMI SPRINGS, FC. 33166

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAUL PERDOMO 1090 MEADOWCARK AUE. Minni Springs, FC. 33166

ARTICLE V - INCORPORATOR

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

> **RAUL PERDOMO** 1090 Meadowlark Ave Miami Springs FL. 33166

The undersigned incorporator has executed these Articles of Incorporation this 26 day of 0C7. 2004

ARTICLE VI- DIRECTOR(S)

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

TRMA GONZALEZ PAUL PERDOMO U.P.

1090 MENDOWLARK AUE.

MIAMI SPRINGS, FL. 33166

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