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To:

Division of Corporations

Fax Number : (850)205-0381

From:

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

Account Number : 071001002335 : (305)599-0839

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### FLORIDA PROFIT CORPORATION OR P.A.

#### DR. LYDIA KALSNER-SILVER INC.

Certificate of Status	0
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# ARTICLES OF INCORPORATION OF

DR. LYDIA KALSNER SILVER INC.

forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

#### ARTICLEINAME

The name of the corporation shall be:

DR. LYDIA KALVER SILVER INC.

The principal place of business of this corporation shall be: 5151 Collins Avenue, Suite 223, Miami, F1 33140

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

#### ARTICLE HI CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 100 SHARES AT \$1.00 PAR VALUE

#### ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

#### ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Dr. Lydia Kalsner-Silver 5151 Collins Avenue, Suite 223, Miami, Fl 33140 President

#### ARTICLE VI INCORPORATORIS

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

Dr. Lydia Kalsner-Silver 5151 Collins Ave, Suite 223 Miemi, Florida 33140

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 15th ...day of DECEMBER 2004

Signature(s) of Incorporator(s)

12/15/04

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:	
DR. LYDIA KALSNER_SILVER INC.	
2. The name and address of the registered agent and office is:  Dr. Lydia Kalsner-Silver, 5151 Collins Ave, Suite 223	_
(P.O. BOX NOT ACCEPTABLE)	¯ .
Miami, Florida 33140	
(CITY/STATE/ZIP)	-
SIGNATURE Dr. Aylar Kolorens TITLE PRESIDENT	hlor
DATE12/15/04	-

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

DATE 12/15/04

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