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To:

Division of Corporations

Fax Number : (850)205-0381

From:

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

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

DEL VALLE SERVICE, INC.

D. WHITE FEB - 2 2005

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ARTICLES OF INCORPORATION

FILED

OF

DEL VALLE SERVICE; INC.

2005 FEB -1 A 9:18

The undersigned incorporator(s), for the upurpose Lotton torming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be:

The principal place of business of this corporation shall be: 477 North University Dr. #21
Plantation / EC 33324

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 III 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 share \$1.00 per velue

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):

PLANTATION FL 33324

ARTICLE VI INCORPORATOR(S)

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

ANGELICA MURUA DEL VALLE 477 north University Dr #12 Octantation, TIP 33324

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, Therety 2000

Signature(s) of incorporator(s) -

*-Angelica Muna.

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

FILED

Pursuant to the provisions of Section 607.325 FEO II da 9, 18 Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the LIANO SECTION OR THE STATE statement in designating the registered office/registered agent, in the State of Florida.

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:
DEC VALLE SERVICE, INC.
2. The name and address of the registered agent and office is:
ANGELICA MURUA DEL VALLE
(P.O. BOX NOT ACCEPTABLE)
(CITY/STATE/ZIP) 33324
(CITY/STATE/ZIP)
SIGNATURE Angelia Mona
TITLE Grenident
DATE OZ/OI/OV
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.
SIGNATURE · Angelius Munia