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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
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FLORIDA PROFIT CORPORATION OR P.A.

nxlevel inspections, inc.

Certificate of Status	0
Certified Copy	1
Page Count	02
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ARTICLES OF INCORPORATION

H05000076494

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be:

NXLEVEL INSPECTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
5330 WEST 2ND AVENUE, HIALEAH, FLORIDA 33012

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO ENGAGE IN ANY LAWFUL ACTIVITY PERMITTED BY THE LAWS OF THIS STATE.

ARTICLE IV SHARES

The number of shares of stock is:
100 SHARES WITH A PAR VALUE $1.00 PER SHARE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MANUEL MENENDEZ-PRESIDENT
5330 WEST 2ND AVENUE, HIALEAH, FL 33012

JUSUAN MENENDEZ-VICE PRESIDENT
5330 WEST 2ND AVENUE, HIALEAH, FL 33012

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:
JUSUAN MENENDEZ
5330 WEST 2ND AVENUE
HIALEAH FL 33012

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:
JUSUAN MENENDEZ
5330 WEST 2ND AVENUE
HIALEAH FL 33012

****

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X _____ Signature/Registered Agent — 3-29-05 Date

X _____ Signature/Incorporator — 3-29-05

16181 S.W. 78 Street
Miami, Florida 33193
Office (305) 388-8406
Fax (305) 388-8412
1-800-860-1000 ID # 664841

PREPARED BY:
Jorge A. Lopez
B.B.A. & M.B.A.

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