

Division of Corporations

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DIVISION OF CORPORATIONS  
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Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (516) 935-3088

**FLORIDA PROFIT CORPORATION OR P.A.**

**Swinwes, Inc.**

Certificate of Status	1
Certified Copy	0
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ARTICLES OF INCORPORATION

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*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:

**Swinwes, Inc.**

ARTICLE II PRINCIPAL OFFICE

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

**Swinwes, Inc.  
1521 N W 180 Way  
Pembroke Pines, FL 33029**

ARTICLE III SHARES

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

**1,000 Shares at No Par Value**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**CORPDIRECT AGENTS, INC.  
103 North Meridian Street, Lower Level  
Tallahassee, FL 32301**

*Prepared By:*  
Bruce B. Hubbard  
77 East John St.  
Hicksville, New York 11801  
1-516-935-3940

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ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

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

Sylvester Wesley - 1521 N W 180 Way, Pembroke Pines, FL 33029 - President

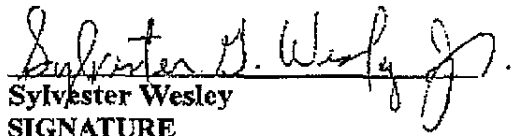
ARTICLES VI INCORPORATOR(S)

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

Sylvester Wesley - 1521 N W 180 Way, Pembroke Pines, FL 33029

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

27th day of April 2005.

  
Sylvester Wesley  
SIGNATURE

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE  
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Swinwes, Inc.**

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

**CORPDIRECT AGENTS, INC.**

Name

**103 North Meridian Street, Lower Level**

(P.O. Box or Mail Drop Box NOT Acceptable)

**Tallahassee, FL 32301**

(City / State / Zip)

*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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.*

*Ed B. Lary*

Ed B. Lary, Ass't Sec

SIGNATURE

April 29, 2005

(Date)

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