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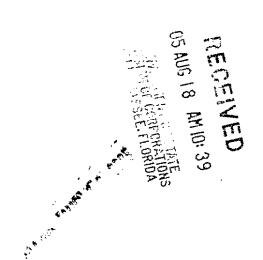
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LAZARUS CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time _ Certified Copy Walk in 2.00 ☐ Mail out Certificate of Sta Photocopy Will wait NEW FILINGS **AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership 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:

ARTICLE II - PRINCIPAL OFFICE

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

10719 SW 148th Mixmi, FL

ARTICLE III -SHARES

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

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

<u>ARTICLE V - INCORPORATOR</u>

The name and str	eet address	of the	incorporator	to these.	Articles o	rf
Incorporation is:		•	\sim	1.5		•

The undersigned incorporator has executed these Articles of Incorporation this 17 day of 14451 2005

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of

Incorporation is (are):

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