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| (Requestor's Name) | | | | |
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| (Address) | | | | |
| | | | | |
| (City/State/Zip/Phone #) | | | | |
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| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| | | | | |
| Certified Copies Certificates of Status | | | | |
| | | | | |
| Special Instructions to Filing Officer: | | | | |
| Special moderations to 1 ming Officer. | | | | |
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COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: BARON SATELITE CONSULTANTS, INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| Enclosed are an orig | ginal and one (1) copy of the art | icles of incorporation and | d a check for: |
|----------------------|--------------------------------------------|----------------------------------------------------|--------------------------------------------------------------------------|
| \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED |
| FRОМ: <u>А</u> | LFREDO CABANAS Name | (Printed or typed) | |
| | 3164 W 74 ST | | |
| | | Address | |
| | HIALEAH, FL 33018 | C P. T. | |
| | City, | State & Zip | |
| | 3058251313 | elephone number | |
| | Dayume 1 | cicpitone number | |

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

BARON SATELITE CONSULTANTS, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3164 W 74 ST, HIALEAH, FL 33018

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TV SATELITE INSTALLATION

ARTICLE IV SHARES

The number of shares of stock is:

50= \$10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALFREDO CABANAS, COMPANY PRESIDENT.

3164 W 74 ST

HIALEAH, FL 33018

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ALFREDO CABANAS

3164 W 74 ST

HIALEAH, FL 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALFREDO CABANAS

3164 W 74 ST

HIALEAH, FL 33018

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

| Charles | 11/16/2005 |
|----------------------------|------------|
| Signaturd/Registered Agent | Date |
| V Janes | 11/16/2005 |
| Signature Incorporator | Date |

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