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Florida Department of State
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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/NON PROFIT CORPORATION
GABLES PROFESSIONAL SERVICES, INC.

Certificate of Status	0
Certified Copy	1
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J. Shivers FEB 02 2006

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:

GABLES PROFESSIONAL SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*4206 LAGUNA ST.
CORAL GABLES, FL 33146*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MANAGEMENT AND CONSULTING SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1,000 @ \$1. each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*ENRIQUE VICIANA PRESIDENT
AND DIRECTOR
4206 LAGUNA ST
CORAL GABLES FL 33146*

ARTICLE VI REGISTERED AGENT

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

*ENRIQUE VICIANA
4206 LAGUNA ST
CORAL GABLES, FL 33146*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*ENRIQUE VICIANA
4206 LAGUNA ST.
CORAL GABLES, FL 33146*

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.

Enrique Viciana

Signature/Registered Agent

2/1/06

Date

Enrique Viciana

Signature/Incorporator

2/1/06

Date

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