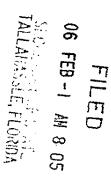
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COVER LETTER

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

ΓΕ NAME ~ <u>MUST INÇL</u>	
\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
(Printed or typed)	-
Address	
614 State & Zip	
elephone number	
	eles of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO (Printed or typed) Address 614 State & Zip

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: AIR TURBULENCIA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4517 N. ST. VINCENT TAMPA, FL. 33614

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100.00

ONE HUNDRED.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANGEL DE LA ROSA 4517 N. ST..VINCENT TAMPA, FL. 33614

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: RALPH PEREZ

10921 AIRVIEW DR. TAMPA, FL. 33625

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: ANGEL DE LA ROSA

4517 N. ST. VINCENT TAMPA, FL. 33614

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

KINIMAN	01/25/2006
Signature/Registered Agent	Date
	01/25/2006
Signature/Incorporator	Date