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(Re	questor's Name)			
(Ad	ldress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
		}		
		}		

Office Use Only



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COVER LETTER

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

SUBJECT:	CON C Tr	nvestment n rename-must incli	nanagement UDE SUPFIX)	Inc.
Enclosed are an orig	ginal and one (1) copy of the artic	eles of incorporation and	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 PY REQUIRED	
FROM:	Clandia Name (224 Dodura	Ainsley Printed or typed) J Street Sunta	2 609	
-	561-355	4ch, F1 33 State & Zip	3401	
Daytime Telephone 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 06 CC
The name of the corporation shall be:
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: The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE ARTICLE II PRINCIPAL OFFICE
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
224 Datura Street Swite 609
West Palm Beach, Fl. 33401
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Freetments
thuestments
ARTICLE IV SHARES
The number of shares of stock is: 100
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):
ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Claudia Ainsley 224 Datura street suite 609
West Palm Beach, F1, 33401
ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Claudia Airisley
224 Datura Street Suite 609
Clandia Airisley 224 Datura Street Suite 609 West PAIN Beach, F1 33401

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
Clarke Lenling 2/14/06
Signature/Registered Agent Date
Clark Husley 2/14/06
Signature/Incorporator Date
Signature/incorporator / Date