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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

FLEUR D'LIZ CORPORATION

Certificate of Status	0
Certified Copy	1
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Estimated Charge	$78.75

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

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TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be:

FLEUR D'LIZ CORPORATOIN

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

6545 W 27 CT APT. 24
HIALEAH, FL 33016

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

PARTY COORDINATOR

ARTICLE IV SHARES
The number of shares of stock is:

101

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
List name(s), address(es) and specific title(s):

NORDIS F. MARTINEZ (DIRECTOR)
6545 W 27 CT APT. 24 HIALEAH, FL 33016
TAWANDA FOXWORTH (OFFICER)
16509 SW 54 CT MIRAMAR, FL 33027

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

NORDIS F. MARTINEZ
6545 W 27 CT APT. 24 HIALEAH, FL 33016

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

NORDIS F. MARTINEZ
6545 W 27 CT APT. 24 HIALEAH, FL 33016

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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

Signature/Registered Agent — 04/07/2006 Date

Signature/Incorporator — 04/07/2006 Date