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To:  
Division of Corporations  
Fax Number : (850) 205-0381

From:  
Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (212) 431-5000  
Fax Number : (212) 431-1441

**FLORIDA PROFIT/NON PROFIT CORPORATION**

**GARDEM, INC.**

Certificate of Status	0
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**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:

GARDEM, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1527 NORTH NORMANDY BOULEVARD  
DELTONA, FL 32725

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY LAWFUL ACT OR ACTIVITY

**ARTICLE IV SHARES**

The number of shares of stock is:

100 No Par Value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

MAGDA MONTEAGUDO, PRESIDENT  
1527 NORTH NORMANDY BOULEVARD  
DELTONA, FL 32725

**ARTICLE VI REGISTERED AGENT**

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

MAGDA MONTEAGUDO  
1527 NORTH NORMANDY BOULEVARD  
DELTONA, FL 32725

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Justin T. Reed, c/o BlumbergExcelsior Corporate Services, Inc.  
62 White Street, 2nd Floor, New York, NY 10013

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated incorporation 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

Justin T. Reed  
BlumbergExcelsior Corporate Services, Inc.  
62 White Street  
New York, NY 10013

6/14/06  
\_\_\_\_\_  
Date

6/19/06  
\_\_\_\_\_  
Date

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