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TRANSMITTAL LETTER

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

SUBJECT:	T: MLGV ENTERPRISES, INC.				
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)					
Enclosed are an orig	rinal and one (1) copy of the arti	cles of incorporation and	a check for:		
\$70.00 Filing Fee	\$78.75 Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,		
1 1111	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status		
		ADDITIONAL CO	PY REQUIRED		
FROM:	ALBA LUCIA VELANI		GENT		
	Name	(Printed or typed)			
5440 N. STATE ROAD 7 SUITE ONE					
	1	Address			
	FORT LAUDERDALE, FL. 33319				
	City,	State & Zip			
	(954)	588-6979			
•	Daytime Telephone number				

NOTE: Please provide the original and one copy of the articles.

Articles of Incorporation

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the State of Florida, adopt the following articles of incorporation:

FIRST

The name of the corporation is: MLGV ENTERPRISES, INC.

SECOND

The period of its duration is Indefinite.

THIRD

The purpose of the corporation is: Sales, Consulting

FOURTH

The aggregate number of authorized shares is 200 shares Par-Value \$5.00

FIFTH

The corporation will not commence business until at least One Thousand (\$1,000.) Dollars have been received by it as consideration for the issuance of Shares.

SIXTH

Cumulative Voting of shares of stock are authorized.

SEVENTH

Provisions Limiting or denying to shareholders the preemptive right to acquire additional or treasury shares of the corporation are: Approved by both the Stockholders and Board of Directors.

EIGHT

Provisions for regulating the internal affairs of the corporation are The Managing Partners (Corporate Officers) will be responsible for all day to day operation.

Articles of Incorporation



NINTH

The address of the initial Registered Office of the corporation is:
9159 NW 40th Place Sunrise, Florida 33351
and the name of it's initial Registered Agent at such address is:
Alba Lucia Velandia

TENTH

Address of the principal place of business is: 5440 N. State Road 7 Suite ONE Fort Lauderdale, Florida 33319

ELEVENTH

The number of directors constituting the initial board of directors of the corporation is ONE, and the names and address of the persons who are to serve as directors until the first annual meeting of the Shareholders or until their successors are elected and shall qualify are:

NA	M	E	

ADDRESS

* Alba Lucia Velandia

5440 N. State Road 7 Suite ONE Fort Lauderdale, FL.33319

* Mauricio Velandia

9159 NW 40TH Place Sunrise, Florida 33351

TWELFTH

The name and address of each incorporator is:

NAME

ADDRESS

* Alba Lucia Velandia

5440 N. State Road 7 Suite ONE Fort Lauderdale, FL.33319

* Mauricio Velandia

9159 NW 40TH Place Sunrise, Florida 33351

Date: July 20, 2006

Alba Lucia Velandia, Incorporator

Mauricio Velandia, Incorporator

Having been named as Registered Agent and to accept services of process for the stated corporation at the place designated in this certificate, I hereby accept the appointment as Registered Agent and Agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, my position as Registered Agent.

Afusia Velandia.
Alba Lucia Velandia, Registered Agent

