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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

Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

HONESTY LOCKSMITH INC.

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8/25/2006

CERTIFICATE OF DESIGNATION REGISTERED ASSET/REGISTERED OFFICE

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SECRETARY OF STATE
SECRETARY OF STATE

ARTICLE OF INCORPORATION

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HONESTY LOCKSMITH INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: HONESTY LOCKSMITH INC.

The principal place of business of this corporation shall be: 6800 SW. 40 th. STREET # 490 MIANI,FL.33155-3708

ARTICLE II HATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

100 X \$10.00 = \$1,000.00

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

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ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

JANIER GONZALEZ 3700 SW. 87 PL. MIAMI,FL. 33165 DIRECTOR

ARTICLE VI INCORPORATOR (S)

The name(s) and street address(es) of the Incorporator(s) to these Article of Incorporation is (are):

JANTER GONZALEZ 3700 SW. 87 PL. MIAMI, FL. 33165 PRESIDENT, SECRETARY & TREASURER

Signature/Title

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CRRTÍFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

JANIER GONZALEZ	TH INC. THE INC	 ze
JANIER GONZALEZ	(Name)	:e
JANIER GONZALEZ	(Name)	3e
JANIER GONZALEZ	(Name)	
3700 SW. 87 PL.	,	
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	MAI WOUNTINDIE	
MIAMI,FL. 33165		
(CITY/	TATE/ZIP)	
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		0: 32 ORIDA
2	BEEN NAMED AS REGISTERE ESS FOR THE ABOVE STATE STERED AGENT AND AGREE REE TO COMPLY WITH THE I F TO THE PROPER AND COM MY FAMILIAR WITH AND ACCI MY AS MY POSITION AS REGI	GLITY/STATE/ZIP) BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE ESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESTREED AGENT AND AGREE TO ACT IN THIS CAPACITY. IT REE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES TO THE PROPER AND COMPLETE PERFORMICE OF MY DUTTE FAMILIAR WITH AND ACCEPT THE DELICATIONS OF MY AS MY POSITION AS REGISTERED AGENT.