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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

THE ARANGO GROUP, INC

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ARTICLES OF INCORPORATION

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The Arango Group, Inc

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The Undersigned incorporator, for the purpose of forming a Corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of the Corporation shall be:

The Arango Group, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7632 NW 114 Place Doral, Fl 33178

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any time and the Distribution is as follow:

250 SHARES

1.00 Each

Francisco Arango

250 Shares

ARTICLE IV INCORPORATORS

The name and street address of the incorporators to these Articles of Incorporation is as follow:

Francisco Arango 7632 NW 114 Place Doral, Fl 33178

The undersigned have executed these Articles of Incorporation this 29 Days of August 2006

Francisco Arango

President

ARTICLE V BUSINESS ACTIVITY

The Company will participate in all legally Business Activity.

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statues, 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.

1. The name of the corporation is:

The Arango Group, Inc

The Name and Address of the registered agent and office is:

Francisco Arango 7632 NW 114 Place Doral, Fl 33178

Signature

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCEDURE FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREED TO ACT IN THIS CAPACITY. TO THE PROPER AND COMPLETE PERFORMANCE OF DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERD AGENT.