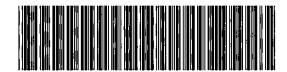
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LAZARUS CORPORATE FILING SERVICE

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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CORPORATION NAME(S) & DOCU	JMENT NUMBER(S), (if known):	
1. BERTOLO INSPE	CTIONS CORP.	
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Ciner	☐ Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	· ,
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Fictitious Name	Limited Partnership	1
•	Reinstatement	
· ·	☐ Trademark	
•	Other	
CR2E031(7/97)	Examiner's Initia	is ·

ARTICLES OF INCORPORATION

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06 DEC -6 PH 12: 01

The undersigned Incorporator(s), for the purpose of forming $a_{SECRETARY\ OF\ STATE}$ corporation under the Florida Business Corporation Act, hereby-addpt(s) E. FLORIDA the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

Bertolo Inspections Corp.

ARTICLE II - PRINCIPAL OFFICE

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

12754 SW 88 st. Miami FC. 33186

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michael Schwerdt 9981 SW 20th St. Miami FL, 33165

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Michael Schwerdt

9981 SW 20th St.

Miani FC 33165

The undersigned incorporator has executed these Articles of Incorporation this day of IDec. 5 200 6

Signature

ARTICLE VI DIRECTOR(S)

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

Michael SCHWERDT - President 9981 SW 20th St. Miam; FL. 33165

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature