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LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE			
MIAMI, FL 33165 (305) 552-5973	3		
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CORPORATION NAME(S) & DOCUMEN	T NUMBER(S), (if kno	wn):	
1. QUALITY RESTORA (Corporation Name)	TION SERVI	ices, INC:	. i
2. (Corporation Name)	(Document #)		
3.			
(Corporation Name)	(Document #)		
4.	**		
(Corporation Name)	(Document #)		
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OTHER FILINGS	REGISTRATION/QUA	LIFICATION	•
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other		∜ •
		Examiner's Initials	

CR2E031(7/97)

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ARTICLES OF INCORPORATION

06 DEC 13 AM 10: 32

The undersigned Incorporator(s), for the purpose of forming &ALLAHASSEE, FLORIDA corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

Outlify Restoration Services, INC.

ARTICLE II - PRINCIPAL OFFICE

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

3410 SW 89 2VE Niani Fl 33165.

ARTICLE III -SHARES

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

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Julio Comas, 3410-SW 89 Jue, Mieni FC 33165.

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06 DEC 13 AM IO: 32

DECKETARY OF STATE

TALLAHASSEE, FLORIDA

ARTICLE V - INCORPORATOR

the name and street address of	the incorporator to	these Articles of
Incorporation is:		
Julio Comas.	3410 SW	89 Auc,
Laonel Sonzillez	Mirin FL	33165.

Signature

ARTICLE VI DIRECTOR(S)

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

Julio Comas - Mesident. Lagral Ponzilez - Vice-President

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