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**LAZARUS
CORPORATE FILING SERVICE**

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. EXCLUSIVE TEAM SERVICE INC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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NEW FILINGS

☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

***THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING
A CORPORATION UNDER THE FLORIDA BUSINESS CORPORATION ACT,
HEBERY ADOPT(S) THE FOLLOWING ARTICLES OF INCORPORATION.***

ARTICLE I- NAME

THE NAME OF THE CORPORATION SHALL BE:

EXCLUSSIVE TEAM SERVICES INC

ARTICLE II- PRINCIPAL OFFICE

1840 WEST 49 STREET
SUITE# 710
HIALEAH, FL 33012.

ARTICLE III- SHARES

1000 SHARES OF \$ 1.00

ARTICLES IV-INITIAL REGISTERED AGENT AND STREET ADD.

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

***HARRY VELAZCO
1840 WEST 49 STREET
SUITE # 710
HIALEAH, FL 33012.***

ARTICLE V- INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR TO THESE ARTICLES OF INCORPORATION IS:

HARRY VELAZCO
1840 WEST 49 STREET
SUITE #710
HIALEAH, FL 33012

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS 4 DAY OF JANUARY, 2007.


SIGNATURE

ARTICLE VI- DIRECTOR(S)

THE NAME(S) AND STREET ADDRESS(ES) OF THE DIRECTOR(S) TO THESE ARTICLES OF INCORPORATION IS (ARE):

HARRY VELAZCO	PRESIDENT
1840 WEST 49 STREET	DIRECTOR
SUITE # 710	SECRETARY
HIALEAH, FL 33012	

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.