

P08000008952

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Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION

GLORYANN ORDONEZ, INC.

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January 24, 2008

FLORIDA DEPARTMENT OF STATE

Division of Corporations

EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: GLORYANN ORDONEZ, INC.
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P.O BOX 6327 - Tallahassee, Florida 32314

*Articles of Incorporation
of
Gloryann Ordoñez, Inc.*

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ARTICLE I. NAME

The name of this corporation is: Gloryann Ordoñez, Inc.

ARTICLE II. NATURE OF BUSINESS

The corporation is organized for the purpose of transacting any lawful business for which corporations may be formed in Florida.

ARTICLE III. TERM OF EXISTENCE

The duration of the corporation is perpetual.

ARTICLE IV. CAPITAL STOCK

The corporation is authorized to issue 100 shares of common stock, par value \$1.00 per share.

ARTICLE V. ADDRESS

The principal and mailing address of the corporation is:

*65 Curtiss Parkway
Miami, Springs, FL 33166*

and the name of the initial registered agent of this corporation at this address is:

*Consulting Services of South Florida, Inc.
2121 Ponce de León Blvd.
Suite 1050
Coral Gables, FL 33134*

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ARTICLE VI. INITIAL DIRECTORS AND OFFICERS

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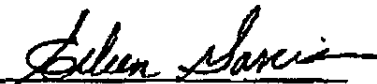
The corporation shall have (1) director and the number of directors may be changed as provided in the bylaws, but shall never be less than one. The name and address of the initial director and officers are:

*Gloryann Ordoñez
President / Secretary / Director
655 Westward Drive
Miami Springs, FL 33166*

ARTICLE VII. INCORPORATOR

The name and address of the Incorporator of this corporation is:

*Eileen Garcia
2121 Ponce de León Blvd.
Suite 1050
Coral Gables, FL 33134*



*Eileen Garcia
Incorporator*

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*Acceptance of Appointment
As Registered Agent*

Pursuant to the provisions of section 607.0501, 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.

1. The name of the corporation is: *Gloryann Ordoñez, Inc.*
2. The name and address of the registered agent and office is:

*Consulting Services of South Florida, Inc.
2121 Ponce de León Blvd.
Suite 1050
Coral Gables, FL 33134*

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SIGNATURE *Eileen Marcia*
TITLE *Incorporator*
DATE *January 14th, 2008*

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in the capacity. I further agree to comply with the provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

SIGNATURE *Eileen Marcia*
For: *Consulting Services of South Florida, Inc.*
DATE *January 14th, 2008*