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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Continued copies					
Special Instructions to Filing Officer:					

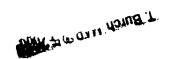




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SECRESSEY OF STATE



## **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: A.	DUANCED Res	toration	Systems	GROUP		
SUBJECT: ADVANCED RESTORATION SYSTEMS GROUP  (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)  INC.						
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:						
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status			
FROM: Felix Louis Baquedano  Name (Printed or typed)  4345 169 Terrace  Address						
Mirani Gaadeus, Fl. 33055 City, State & Zip						
(954) 226 - 822 9 Daytime Telephone number						

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME  The name of the corporation shall be:  Advanced Restoration SY	stems Grow
ARTICLE II PRINCIPAL OFFICE  The principle street address and mailing address, if different is:	
MFAMI GARDENS, F1. 33055  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Any ADD All LAW full business	FILED 2000 MAR 25 PM 25 CHREADARY DAS TALLAMASSEN, FIL
ARTICLE IV SHARES The number of shares of stock is:	W 4: 25
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
Felix Louis BAQUEdAND presi	, Del
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered Felix Louis BAQUEDATO  (3) 169 TENNAGE  MIRMIGANDENS, Fl. 33055  ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	d agent is:
Felix Louis Praque dans 4345 167 tennace miami Ganden Fl. 33055	
**************************************	**************************************
Skinature/Rogistered/Agent  Office Single Si	Date (2) 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2 / 2
Signature/Incorporator	Date Date