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FLORIDA PROFIT/NON PROFIT CORPORATION

ESTELA 3 INC

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ARTICLES OF INCORPORATION

THE UNDERSIGNED INCORPORATOR(S), FOR THE PURPOSE OF FORMING A 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:

ESTELA 3 INC

ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS CORPORATION SHALL BE:

7955 N.W. 12TH STREET
SUITE 400
DORAL, FL 33126

ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

The maximum number of shares of stock that the Corporation is authorized to have outstanding at any one time is 100 shares at \$ 1.00 per share. Such stocks may be issued by the Corporation from time to time for such consideration as may be fixed by the board of Director thereof, and may be paid in cash, labor or services.

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

EVELYN CHAPONICK
7955 N.W. 12TH STREET
SUITE 400
DORAL, FL 33126

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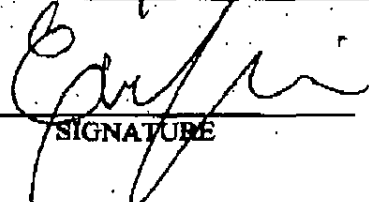
ARTICLE V - INCORPORATOR

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

**EVELYN CHAPONICK
7955 N.W. 12TH STREET
SUITE 400
DORAL, FL 33126**

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS

24 DAY OF March, 2008


SIGNATURE

ARTICLE VI - DIRECTOR(S)

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

**EVELYN CHAPONICK
7955 N.W. 12TH STREET
SUITE 400
DORAL, FL 33126**

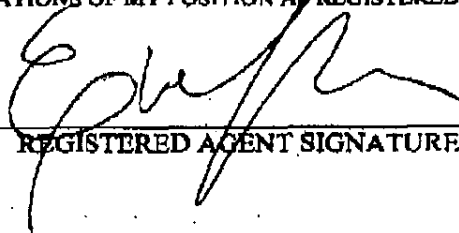
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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

HAVING SEEN 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 ACCEPTED THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.


REGISTERED AGENT SIGNATURE

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