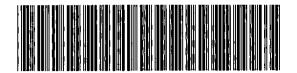
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<u>AMENDMENTS</u>
☐ Amendment
Resignation of R.A., Officer/Director
Change of Registered Agent Dissolution/Withdrawal
Merger
REGISTRATION/QUALIFICATION
☐ Foreign
Limited Partnership
Reinstatement
☐ Trademark ☐ Other



#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming under the Florida Business Corporation Act, hereby adopt(s) the following Articles of incorporation:

#### ARTICLE I - NAME-

The name of the corporation shall be:

--- TRADALES, INC

#### ARTICLE II - PRINCIPAL OFFICE -

The principal business address of this corporation shall be:

--- 870 WESTWARD DRIVE MIAMI SPRINGS, FLORIDA 33166

The mailing address of this corporation shall be:

--- 870 WESTWARD DRIVE MIAMI SPRINGS, FLORIDA. 33166

#### ARTICLES III - SHARES-

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

--- 100 Shares Common Stock, No Par Value

#### ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

--- ADA FRANCIS RIOS 870 WESTWARD DRIVE MIAMI SPRINGS, FLORIDA 33166

#### ARTICLES V - INCORPORATOR -

The name and street address of the incorporator to these Articles of Incorporation is:

---ADA FRANCIS RIOS 870 WESTWARD DRIVE MIAMI SPRINGS, FLORIDA 33166

The undersigned incorporator has executed these Articles of Incorporation this 11 Day of September, 2008

Signature

#### ARTICLES VI - DIRECTOR(S)

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

--- Ada Francis Rios. 870 Westward Drive. Miami Springs, Florida 33166. President and Director

#### CERTIFICATION 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 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

SECRETARY OF STATE