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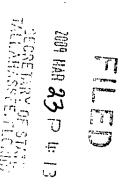
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COVER LETTER

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

- · · · · · · · · · · · · · · · · · · ·	SIGN CONSULTANT & SUPERV (PROPOSED CORPORA	ATE NAME – <u>MUST INCI</u>	UDE SUFFIX)
losed are an orig	inal and one (1) copy of the art	icles 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: ZA	IDA LIS TORRES Name	(Printed or typed)	
	2745 SW 17th STREET	Address	
	MIAMI, FL 33145	, State & Zip	
	786-506-5160	Telenhone number	·

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

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:

LIS DESIGN CONSULTANT & SUPERVISION COMPANY

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

2745 SW 17th STREET MIAMI, FL 33145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **DESIGN CONSULTATIONS & DESIGN CONSTRUCTION SUPERVISIONS**

ARTICLE IV SHARES

The number of shares of stock is: 100 COMMON SHARES

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): ZAIDA LIS TORRES **PRESIDENT** 2745 SW 17th STREET MIAMI, FL 33145

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ZAIDA LIS TORRES 2745 SW 17th STREET MIAMI, FL 33145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: ZAIDA LIS TORRES 2745 SW 17th STREET MIAMI, FL 33145

Having been named as registered agent to accept service of process for certificate, I am familiar with and accept the appointment as registered ag	
	03/20/2009
Signature/Registered Agent	Date
Signature/Incorporator	03/20/2009 Date