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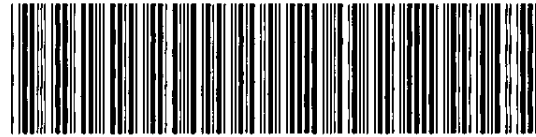
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. SILVA TECHNOLOGY INSTITUTE
(Corporation Name) (Document #)
2. INC
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

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ARTICLES OF INCORPORATION

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

SILVA TECHNOLOGY INSTITUTE INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3710 NW 88 AVE APT 215

SUNRISE, FL 33351

ARTICLE III SHARES

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

100 Shares @ \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JUAN CARLOS SILVA
3710 NW 88 AVE APT 215
SUNRISE, FL 33351

ARTICLE V INCORPORATOR(S)

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

JUAN CARLOS SILVA
3710 NW 88 AVE APT 215
SUNRISE, FL 33351
(954)459-0977

President / Secretary

DIANA EDITH SILVA
3710 NW 88 AVE APT 215
SUNRISE, FL 33351
(954)459-0977

Vice-president

The undersigned incorporator(s) has (Have) executed these Articles of Incorporation this 29 day of July 2009



Signature

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

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 SILVA TECHNOLOGY INSTITUTE INC

3710 NW 88 AVE APT 215
SUNRISE, FL 33351

2 The name and address of the registered agent and office is:

JUAN CARLOS SILVA

Name

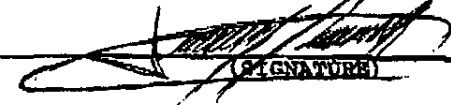
3710 NW 88 AVE APT 215

(P.O. Box or Mail Drop NOT acceptable)

SUNRISE, FL 33351

(City/State/Zip)

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 this capacity. I further agree to comply with the provisions 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)

07/29/09
(DATE)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 23214

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