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Florida Department of State  
Division of Corporations  
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## FLORIDA PROFIT/NON PROFIT CORPORATION

SALGADO & ASSOCIATES, INC.

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August 5, 2009

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RE: ZARUS

SUBJECT: SALGADO & ASSOCIATES, INC.  
REF: W09000035517

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and retransmit the complete document, including the electronic filing cover sheet.

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Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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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:

SALGADO & ASSOCIATES GROUP Inc

**ARTICLE II - PRINCIPAL OFFICE**

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

2829 BIRD AVENUE #5  
MIAMI, FL 33133

**ARTICLE III - SHARES**

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

100 SHARES

**ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS**

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

ALEXANDER SALGADO  
2829 BIRD AVENUE #5  
MIAMI FL 33133

FROM : LAZARUS

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ARTICLE V - INCORPORATOR

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

ALEXANDER SALGADO  
2829 BIRD AVENUE #5  
MIAMI, FL 33133

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES

OF INCORPORATION THIS  
4 DAY OF August 2009

  
SIGNATURE

ARTICLE VI - DIRECTOR(S)

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

ALEXANDER SALGADO  
(PRESIDENT)

CERTIFICATE 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 COMPLETE  
PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION  
AS REGISTERED AGENT

  
REGISTERED AGENT SIGNATURE

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