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(Red	questor's Name)				
(Address)					
(Add	dress)				
(City	//State/Zip/Phone #)				
PICK-UP	WAIT [MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of St	atus			
Special Instructions to Filing Officer:					
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SECRETARY OF STATE
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COVER LETTER

	Registration S Division of C				
SUBJE	CT: RIVER	DYNE CORPORATI	ION		
			esulting Flor	da Profit Cor	poration
					, and fees are submitted to convert an cordance with s. 607.1115, F.S.
Please re	eturn all corr	espondence concerning	g this matte	r to:	
BASSA	M GHAND	OUR			
		Contact Person			
RIVER	DYNE				
		Firm/Company			
7501 SV	W 127 STR	EET MIAMI FL 33156 Address	<u> </u>		
MIAMI,	FL 33156	ity, State and Zip Code			
ghando E-ma	oury@yaho ail address: (to	OO.COM be used for future annual r	eport notifica	lion)	
For furth	ner informati	on concerning this ma	tter, please	call:	
BASSA	M GHANDO	UR	at (786) 295	6606
	Name of Con	tact Person		ode and Dayti	me Telephone Number
Enclosed	l is a check f	or the following amou	int:		
□ \$105.0	0 Filing Fees	\$113.75 Filing Fees and Certificate of Status	■\$113.75 and Certific		✓\$122.50 Filing Fees, Certified Copy, and Certificate of Status
Registrate Division Clifton E	F ADDRES: tion Section of Corporat Building ecutive Cent	ions	R D P.	egistration	Corporations 27

Tallahassee, FL 32301

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the cor	poration shall be: RIVERD	YNE CORPORA	TION
ARTICLE II	PRINCIPAL OFFICE		and
7501 SW	Principal <u>street</u> address 127 STREET MIAMI FL 33156	Mailing address, if di	fferencis:
			P2 10
ARTICLE III	PURPOSE		SA
	ich the corporation is organized is:		THO P
• •	, 5		750 5
DEVELOP AND	DEPLOY SOFTWARE THAT DELIVER	R ENTERPRISE INFORMATION MANAGE	MENT SAUTENS
ARTICLE IV	SHARES		
The number of share			
	100		
	INITIAL OFFICERS AND/OR DIRE		
Address:	7501 SW 127 ST MIAMI FL 33156		
Name and Tit	le·	Name and Title:	
Address:			
			·
Name and Tit	le.	Name and Title:	
Address:		Address:	
		BASSAM GHANDOUR	
ARTICLE VI	REGISTERED AGENT		
	ida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	BASSAM GHANDOUR		
Address:	7501 SW 127 ST MIAMI FL 33156	14.5504	
ARTICLE VII	INCORPORATOR		
	ress of the Incorporator is:		
Name:	MOHAMMAD GHANDOUR		
Address:	7501 SW 127 ST MIAMI FL 33156		
Having been named	d as registered agent to accept service of	process for the above stated corporation at ti	ie place designated in
		t as registered agent and agree to act in this co	
	- J		
	5.6	02/10/2011	
Requir	ed Signature/Registered Agent	Date	
		in are true. I am aware that any false infort e felony as provided for in s.817.155, F.S.	mation submitted in a
1, 01	1	00/40/0044	
<u> </u>	d Signature/Incorporator	02/10/2011	
Require	d Signature/Incorporator	Date	