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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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MILED AND OF STATE TALLAHASSEE F. STATE

Tapes Par 50 SAM

DATE 04/20/2011

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

| : | Re: | Dassall Co. (Name of Corporation) | , Inc. |
|------------|-----------------------------------------------|-------------------------------------------------------------|-------------------------------------|
| : | | | |
| Gentlemen: | | | |
| | ise find the original and impount of \$ 78.75 | d one copy of the Articles of Inco | rporation, together with my |
| | | g Fees, Certified Copy of Articles above named corporation. | 38 E |
| | | Very truly yours. | M W : 00 |
| | | x A | (Molvidual's Name) |
| | | Qa | njel Vazquez |
| | | Dass | Sall Co., Inc. Name of Corporation) |

DV

- MAILING ADDRESS OF CORPORATION -

PHONE

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Seminole Form 215: Trans. Letter (019

ARTICLES OF INCORPORATION

| · | | of | |
|----------------|------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------|
| | Dassa | ll Co., Inc. | |
| | (na | me of corporation) | • |
| | signed acting as the incorporators of a co ticles of incorporation for such corporati | | ss Corporation Act, adopt(s) |
| | ARTICLE | I'- CORPORATE NAME | |
| The name | of the corporation is: | | ASS ME |
| | Dassa | ill Co., Inc. | E P |
| This corpo | ARTI oration shall exist perpetually unless diss | CLE II - DURATION olved according to Florida law. | 28 M M 00 00 |
| | ART | ICLE III - PURPOSE | ₩ |
| | ration is organized for the purpose of end the State of Florida. | gaging in any activities or business | permitted under the laws of the |
| | ration is authorized to issue 1000 ARTICLE V - | INITIAL PRINCIPAL OFFICE | |
| | address of the initial principal office and | I, if different, the mailing address is | : |
| STREET ADDI | RESS | | |
| | 1493 main street | | |
| CITY | Dunedin | FLORIDA | ZIP 34698 |
| | ddress, if different | | |
| STREET ADDI | RESS | | |
| 7 | | | |
| CITY | | FLORIDA | ZIP |
| <i>:</i> ; , , | ARTICLE VI - INITIAL | REGISTERED OFFICE AND A | GENT |
| The stree | t address of the initial registered offi | ce and the name of the initial reg | sistered agent at the office is |
| NAME | | | |
| ADDRESS | Daniel Vazquez 4372 aldon court | | |
| CITY | Palm Harbor | FLORIDA | ZIP 34685 |

ARTICLE VII - INITIAL BOARD OF DIRECTORS

| This corporation shall have <u>one</u> (<u>1</u> |) directors initially. The number of directors may be |
|-------------------------------------------------------------------------|-------------------------------------------------------|
| either increased or diminished from time to time by the By-Laws, but | shall never be less than one (1). The names and |
| addresses of the initial director(s) of the corporation are as follows: | |

| NAME | Daniel Vazquez | | | | |
|---------|---------------------------|-------|-----|-----|-------|
| ADDRESS | 4372 aldon court | | | | |
| CITY | Palm Harbor | STATE | Fl. | ZIP | 34685 |
| NAME | Abimael Troche | | | | |
| ADDRESS | 303 SE 17th Street, Suite | #104 | | | |
| CITY | Ocala | STATE | FL | ZIP | 34471 |
| NAME | | | | | |
| ADDRESS | | | | | |
| CITY | | STATE | | ZIP | |

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

| NAME | Daniel Vazquez | | | | |
|---------|---------------------------|-------|----|-----|-------|
| ADDRESS | 4372 aldon court | | | | |
| CITY | Palm Harbor | STATE | FL | ZIP | 34685 |
| NAME | Abimael Troche | | | | |
| ADDRESS | 303 SE 17th Street, Suite | # 104 | | | |
| CITY | Ocala . | STATE | FL | ZIP | 34471 |
| NAME | | | | | |
| ADDRESS | | | | | |
| CITY | | STATE | | ZIP | |

| The undersigned i | ncorporator(s) have executed | these Articles of Incorporation this 20th |
|-------------------|------------------------------|-------------------------------------------|
| day of | April | |
| • | | |
| | | X (Signature) |
| | | (Signature) |
| | | (Signature) |

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

| | Dassall CO. , Inc. |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | (name of corporation) |
| | |
| Pursuant to Florida St | atutes Sections 48.091 and 607.0501, the following is submitted: |
| The above corporation | , organized under the laws of the State of Florida with its registered office |
| as indicated in the Art | cles of Incorporation |
| at | 1493 Main Street |
| | Dunedin, FL 34698 |
| has named | Daniel Vazquez |
| located at the aforesai | d address, as its registered agent to accept service of process within this |
| state. | SECRETARY OF STATE AHASSEE, FLORILANASSEE, FLORILAN |
| Having been named a | s registered agent and to accept service of process for the above stated |
| corporation at the place | e designated in this certificate, I hereby accept the appointment as regis- |
| tered 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 obligat | ions of my position as registered agent. |
| 9 0 | |
| | , <i> </i> |
| X | x April 20, 2011 |