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**FLORIDA PROFIT/NON PROFIT CORPORATION
G.A.P. WOODS TRADING CORP.**

Certificate of Status	0
Certified Copy	1
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February 22, 2012

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: G.A.P. WOODS TRDDING CORP.
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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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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:

G.A.P. Woods TRADING Corp.

ARTICLE II - PRINCIPAL OFFICE

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

11412 SW 137 Place
Miami, FL 33186

ARTICLE III - SHARES

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

1,000

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GABRIEL AMASTHA
11412 SW 137 Place
Miami, FL, 33186

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ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

GABRIEL AMASTHA
11412 Sw 137 Place
Miami FL 33186

The undersigned incorporator has executed these Articles of Incorporation this
21 day of February 2012.


Signature

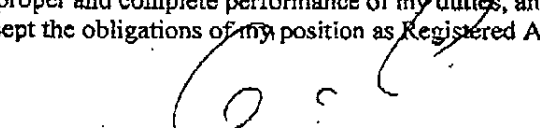
ARTICLE VI - DIRECTOR(S)

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

GABRIEL AMASTHA (Pres)
LINA GARCIA (V. Pres)
LINA GARCIA (Secretary)

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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