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# P120000060173

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**FLORIDA PROFIT/NON PROFIT CORPORATION  
ENTRELEAD INC.**

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July 9, 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LAZARUS CORPORATE FILING SERVICE, INC.

SUBJECT: ENTRELEAD INC.  
REF: W12000036073

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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:

ENTRELEAD INC.

**ARTICLE II - PRINCIPAL OFFICE**

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

20909 SW 90 PL  
CUTLER Bay FL 33189

**ARTICLE III - SHARES**

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

100

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

The name and address of the initial registered agent is:

ARIEL ANCHIA  
20909 SW 90 PL  
CUTLER Bay FL 33189

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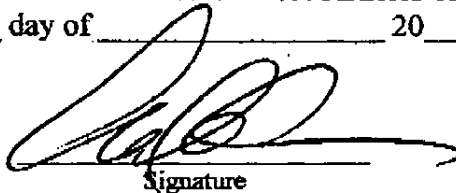
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**ARTICLE V - INCORPORATOR**

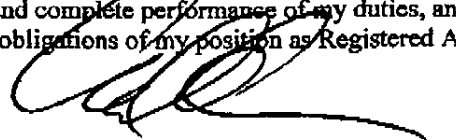
The name and address of the incorporator to these Articles of Incorporation is:

ARIEL ANCHIA  
20909 SW 90 PL  
CUTLER BAY, FL 33189The undersigned incorporator has executed these Articles of Incorporation this  
\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

Signature

**ARTICLE VI- DIRECTOR (S)**The name(s) and street address (es) of the director(s) to these Articles of  
Incorporation is (are):ARIEL ANCHIA - PRESIDENT  
MIGUEL ANCHIA-DIRECTOR  
BARBARA FONTE - DIRECTOR**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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