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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 534092 4300239 AUTHORIZATION : COST LIMIT : ORDER DATE: March 9, 2015 ORDER TIME : 10:38 AM ORDER NO. : 534092-005 CUSTOMER NO: 4300239 DOMESTIC FILING NAME: WILLIAMS VALVE CONSULTING SERVICES, INC. EFFECTIVE DATE: XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CONTACT PERSON: Courtney Williams - EXT. 62935

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CORPORATION SERVICE COMPANY

EXAMINER'S INITIALS:

## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: WILL	LIAMS VALVE CONSULTING SERV	ICES, INC.				
3013/201	(PROPOSED CORPORA	ΓΕ NAME – <u>MUST INCL</u>	JDE SUFFIX)			
Enclosed are an o	riginal and one (1) copy of the arti	cles of incorporation and	a check for:			
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy				
		ADDITIONAL CO	& Certificate of Status PY REQUIRED			
			· · · · · · · · · · · · · · · · · · · ·			
FROM:	Lee Harrison Corbin, Esq., Kurzman	Eisenberg Corbin & Leve	r. LLP			
	Name	(Printed or typed)				
1	North Broadway, 10th Floor					
Address						
V	Vhite Plains, New York 10601		•			
	City, State & Zip					
(*	914) 285-9800					
	Daytime Telephone number					
L	Corbin@Kelaw.com					
	E-mail addrass: (to be used	for figure comed supprin	Stillestion)			

NOTE: Please provide the original and one copy of the articles.

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

CLE II PRI	NCIPAL OFFICE			
CDD II FAI	Principal street address		Mailing address, i	f different is:
Bonita Bay Blvo	d, #1602		•	
a Springs, FL 3	4134			ipi. Dani alaphahanika shi, dipunyimigan e astron. Ye' artari bigan dipunyimigan
		<del></del>		
CLE III PUR	POSE To own, di			
rpose for which	he corporation is organized is:			
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mber of shares of	IRES stock is:	 <u>:S</u>		
mber of shares of	IRES 200, no par value  Stock is:  FIAL OFFICERS AND/OR DIRECTOR  Richard Sherman, President, Director	 <u>:S</u>		
CLE V INT	IRES 200, no par value stock is:  FIAL OFFICERS AND/OR DIRECTOR Richard Sherman, President, Director  4851 Bonita Bay Blyd, #1602	 <u>:S</u>		
mber of shares of CLE V INT Name and Title	IRES 200, no par value stock is:  FIAL OFFICERS AND/OR DIRECTOR Richard Sherman, President, Director  4851 Bonita Bay Blyd, #1602	.S _ Name and Title:		
mber of shares of CLE V INT Name and Title	IRES 200, no par value  Stock is:  TIAL OFFICERS AND/OR DIRECTOR Richard Sherman, President, Director  4851 Bonita Bay Blvd, #1602	.S _ Name and Title:		
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mber of shares of  CLE V INT  Name and Title  Address  Name and Title:	IRES stock is: 200, no par value  FIAL OFFICERS AND/OR DIRECTOR Richard Sherman, President, Director  4851 Bonita Bay Blvd, #1602  Bonita Springs, FL 34134	Name and Title: Address: Name and Title:		
mber of shares of  CLE V INT  Name and Title  Address  Name and Title:	IRES stock is: 200, no par value  FIAL OFFICERS AND/OR DIRECTOR Richard Sherman, President, Director  4851 Bonita Bay Blvd, #1602  Bonita Springs, FL 34134	Name and Title: Address: Name and Title:		
Moder of shares of CLE V INT  Name and Title  Address  Name and Title:  Address	IRES stock is: 200, no par value  FIAL OFFICERS AND/OR DIRECTOR Richard Sherman, President, Director  4851 Bonita Bay Blvd, #1602  Bonita Springs, FL 34134	Name and Title: Address: Name and Title: Address:		
Moder of shares of CLE V INT  Name and Title  Address  Name and Title:  Address	IRES stock is:  TIAL OFFICERS AND/OR DIRECTOR Richard Sherman, President, Director 4851 Bonita Bay Blvd, #1602  Bonita Springs, FL 34134	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:		

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and Fl	orida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	Richard Sherman	nam.
Address:	4851 Bonita Bay Blvd. #1602	
	Bonita Springs, FL 34134	•
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	Lee Harrison Corbin, Esq.	_
Address:	1 North Broadway, 10th Floor	
	White Plains, NY 10601	
	im funiliar with und accept the appointment as re	ess for the above stated corporation at the place designated in egistered agent and agree to act in this capacity
By:	Required Signature/Registered Agent	Makes 6 2016
_		Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felo	e true. I am aware that the false information submitted in a ny as provided for in s.817.155, F.S.
		HAD. 116. 2015
	Required Signature/Incorporator	HARLY 6, 2015