Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

: LAZARUS CORPORATE FILING SERVICE, INC.

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Email	Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION ONS CORPORATION

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Certified Copy	1
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ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

Effective - 1/117 ARTICLE 1 NAME: The name of the corporation is:		
QNS CORPORATION		
ARTICLE II PRINCIPAL OFFICE:		
The principal street address and mailing address is		
6450 NW 56 ST DORAF + L 33/66	,	
ARTICLE III SHARES: The number of shares of stock is: 100		
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:		
(P) JORGE ANTONIO JAMES VOLERO.		
(VP) LIGIA MERCEDES MORLOY BITRIAGO.		
(VA) ROBERT C. ARUSTRONG		
(VP) DANIEL FARIQUE ROWERD SUMEZ.		
(UP) BIOVANNY José MADRIO FLORES		
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:		
The name and Florida street address (PO Box not acceptable) of the registered agentism Torop Antonio Tomes Valeres	16 DEC	
8450 NW 56 ST	ŧ	71
Down () Fl 331(0(0	8 PH	<u></u>
	$\vec{\Sigma}$	\Box
ARTICLE VI INCORPORATOR: The name and address of the Incorporator	22	
Jorge Antonio James Valeró		
U8450 NW 56 ST		
Doral FL 33166		

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Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Regispered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree feloxy as provided/for in s.817.155, F.S.

Incorporator

Date

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LURETART OF STATE

ALLAMASSEE FLORINA