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| To: | | |
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| | Division of Co | rporations |
| | Fax Number | : (850)617-6381 |
| From: | | |
| | Account Name | : LAZARUS CORPORATE FILING SERVICE, INT |
| | Account Number | : I20000000019 |
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| | | in the state of th |
| *Enter | the email address | s for this business entity to be used for future |
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| C | il Address: | |

FLORIDA PROFIT/NON PROFIT CORPORATION ARCIA CONSTRUCTION INC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$78.75 |

| PAGE | 02/03 |
|------|-------|
| FMUL | 94/93 |

ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

| ARTICLE I NAME: The name of the corporation is: |
|---|
| ARCIA CONSTRUCTION INC |
| TAIC TAIC |
| ARTICLE II PRINCIPAL OFFICE: |
| The principal street address and mailing address is: |
| 367 W 33 RD 51 |
| HIALEAH FL 33012 |
| ARTICLE III SHARES: The number of shares of stock is: |
| ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS: |
| REINALDO CORDERO ARCIA (P) |
| |
| |
| |
| |
| |
| |
| ARTICLE V INITIAL REGISTERED AGENT AND STREET AND DECK |
| The name and Florida street address (PO Box not acceptable) of the registered agent in |
| The name and Florida street address (PO Box not acceptable) of the registered agent in |
| The name and Florida street address (PO Box not acceptable) of the registered agent in |
| The name and Florida street address (PO Box not acceptable) of the registe red agent is: REINACDO CORXERO ARCIN 367 W 33 RD 57 |
| The name and Florida street address (PO Box not acceptable) of the registe red agent is: REINACDO LORSERO ARCIA |
| The name and Florida street address (PO Box not acceptable) of the registe red agent is: REINACDO LORXERO ARCIA 367 W 33 RD 57 HIALEAH FL 33012 |
| The name and Florida street address (PO Box not acceptable) of the registe red agent is: REINACDO LORNERO ARCIA 367 W 33 RD 57 HIALEAH FL 33012 ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: |
| The name and Florida street address (PO Box not acceptable) of the registe red agent is: REINACDO CORNERO ARCIA 367 W 33 RD 57 HIALEAH FL 33012 ARTICLE VI INCORPORATOR: The name and address of the Incorporator is: |

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 |
|--|
| Registered 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 felony as provided for in s.817.155, F.S. |
| Incorporator |