Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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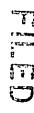
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$\nabla i$		Fax Number : (850)617-6381			
H. 17 1. 202	From:				
,	110	Account Name : EXPRESS CORPORATE FILING SERVICE INC.			
3		Account Number : I20000000146			
,		Phone : (305)444-4994			
		Fax Number : (305)328-4774			
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## FLORIDA PROFIT/NON PROFIT CORPORATION LS DISPATCH SERVICE INC

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Help



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

, To

CLE II PRI	NCIPAL OFFICE		
30 SW 210	Principal <u>street</u> address	Mailing address, if different is: 10430 SW 210 TER	
MI_FL_33	Principal street address TER 89	MIAMI, FL 33189	
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unber of shares  CLE V INT  Name and T  Address	of stock is: SHARES: 100 @ \$1.0  TIAL OFFICERS AND/OR DIRECTORS  ittle: LISBET DEL VALLE - P  10430 SW 210 TER	Name and Title: Address:	2024 ( ) ( )
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Name and	d Title:	Name and Title:		
Address		Address:		
		**************************************	····	
	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of	the registered agent is:		
Name:	LISBET DEL VALLE			
Address:	10430 SW 210 TER			
	MIAMI, FL 33189			
ARTICLE VII	INCORPORATOR			
The name and ad	dress of the Incorporator is:			
Name:	LISBET DEL VALLE			
Address:	10430 SW 210 TER			
	MIAMI, FL 33189			
Effective date, if	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and cannot	. (OPTIONAL) the more than five days prior or S	90 days after the	
	inserted in this block does not meet the applicable of state on the Department of State's records.	statutory filing requirements, this da	ite will not be listed as	
	ed as registered agent to accept service of process fo miliar with and accept the appointment as registere			
Lisber del val	<u>lle terralbas</u>		<b>20</b>	
	Required Signature/Registered Agent		Date	
document to the L	ument and affirm that the facts stated herein are t Department of State constitutes a third degree felony		2	
Lisbet del va	lle torralbas		Section 1	
Required Signatus	re/incorporator	i)ate	G. H. S. M.	