TRANSMITTAL LETTER

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



CREITEL C SHAME & CIEC (Proposed corporate name - must include suffix)

ed is an origina \$70.00 Filing Fee	#78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate	nd a check
FROM:	MICHY-6	EL CIKIL MIVOT (printed or typed)	τί	
	1130(}	COVINGTON CT.		w/x>
	OVIELO	Copy of the State & Zip	3,765	(//
		SSY-7875		

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

ARTICLES OF INCORPORATION

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:

Corrn excipt CALITAL CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

LIEU COUNGION STREET DUIEDO, FLORILE ETTUS

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000

ARTICLE IV INFITAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MICHAEL GELAVOTTI 1130 COMMETON CT. DUIELO, FL EDTGS

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MICHEEL BINGTON IT.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Commercial Cristale	CONTOUNTION
2. The name and address of the reg	istered agent and office is:	
11 WHAREC	(Name)	_
130 (b)	OX OF Mail Drop Box NOT ACCEPTABLE)	
DUIETO	FLORINE 32765 (CITY/STATE/ZIP)	_

Having been named as registered agent and to accept service of process for the above stated corporation of the place designated in this certificate, I hereby accept the appointment as registered agent and agra. To act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) (DATE)