

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
 TOLL FREE No. 1-800-342-8062
 FAX (904) 222-1222

NAME _____

FIRM _____

ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
 One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

K.R. MAR 31 1997

REQUEST TAKEN CONFIRMED APPROVED

DATE _____

TIME _____ CK No. _____

BY AMP _____

WALK-IN 3/31 @ 330
 Will Pick Up

_____ of _____ No. 53789

RE: Silvio Dos

Santos Corp

	C.C. FEE.	DISBURSED
<input type="checkbox"/> Capital Express™		
<input type="checkbox"/> Art. of Inc. File		
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> () Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement		
<input type="checkbox"/> Reg. Agent Service		
<input type="checkbox"/> Document Filing		
<input type="checkbox"/> Corporate Kit		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, _____ Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ()		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX () pgs.		

SUBTOTALS _____

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

Please remit invoice number with payment
 TERMS: NET 10 DAYS FROM INVOICE DATE
 1 1/2% per month on Past Due Amounts
 Past 30 Days, 18% per Annum.

THANK YOU
 from
 Your Capital Connection

97 MAR 31 PM 3:29
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

FILED
97 MAR 31 PM 3:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: SILVIA DOS SANTOS CORP
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM: SILVIA LUIZ DOS SANTOS
Name (printed or typed)

9000 LITTLETON CT
Address

ORLANDO, FL 32817
City, State & Zip

(407) 677-9895
Daytime Telephone number

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF SILVIO DOS SANTOS CORP.

The undersigned Incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

Article I, Name

The name of the corporation shall be:
Silvio dos Santos Corp.

Article II, Mailing Address

The mailing address of this corporation shall be:
9000 Littleton Court - Orlando, FL., 32817.

Article III, Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1000 Shares with \$ 1.00 Par Value.

Article IV, Initial Registered Agent and Street Address

The name and address of the initial registered agent is:
Silvio Luiz dos Santos
9000 Littleton Court - Orlando, FL., 32817.

Article V, Incorporator.

The name and address of the Incorporator to these Articles of Incorporation is:

Silvio Luiz dos Santos
Address
9000 Littleton Court, Orlando, FL., 32817.

Continuation, Page 2

Article VI, Purpose.

The purpose of this corporation shall be all types of construction and related operations thereof, sell, invest, and administer assets of all types such as stocks, bonds, real estate and others. It can also be the representative of other companies if so is desired. This Corporation will trade with international and national corporations and individuals alike, always respecting the regulations existing in those areas. These objectives should not affect the capability to do all other businesses under the Laws of the United States of America and the State of Florida.

Article VII, Initial Board of Directors and Officers.

The names and Post Office Addresses of the members of the first board of directors and Officers are:

Silvio Luiz dos Santos - President, Director, Treasurer and Secretary

Postal address at:

9000 Littleton Court - Orlando, Fl., 32817.

Continuation, Page 3

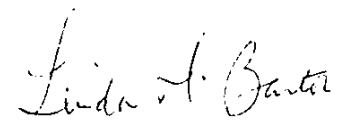
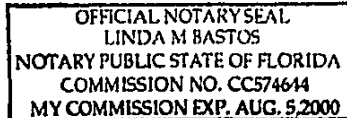
Affidavit

State of Florida, Orange County.

Before me this day personally appeared Silvio L. dos Santos, who being duly sworn, deposed and said that he is the Incorporator of Silvio dos Santos Corp., and is hereby duly authorized, responsible and apt to incorporate according to the Statutes of the State of Florida.


Silvio Luiz dos Santos

Sworn to and subscribed before me this March 13, 1997.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: SILVIO DOS SANTOS CORP.

2. The name and address of the registered agent and office is:

SILVIO LUIZ DOS SANTOS
(Name)

9000 Littleton Ct.
(P.O. Box not acceptable)

ORLANDO, FL 32817
(City/State/Zip)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree 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.

Silvio dos Santos
(Signature)

Linda M. Bastos

OFFICIAL NOTARY SEAL
LINDA M BASTOS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC574644
MY COMMISSION EXP. AUG. 5, 2000