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Profit NonProfit	AMENDMENTS  Amendment  Resignation of R.A., Officer/ Direction	ector	R 18 PM 3: 27	
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Annual Report Fictitious Name	REGISTRATION ACQUALIFICATION Foreign	1	APR 22 PH 3: 22  CHARASSEF FLORIDA	
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# ARTICLES OF INCORPORATION OF

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 by:

WILLYMIR CORPORATION

97 APR 22 PM 3: 22
SECHETARY OF STATE
TALLAHASSEE FLORID.

### ARTICLE II PRINCIPAL OFFICE

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

9609 S.W. 2 LANE MIAMI FL, 33174

## ARTICLE III CAPITOL STOCK

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

500 SHARE 1.00 PER SHARE USD 500.00 500 SHARE WILLIAM MIRANDA

### ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

WILLIAM MIRANDDA 9609 S.W. 2 LANE. MIAMI FL, 33174

## ARTICLE V INCORPORATOR(S)

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

WILLIAM MIRANDA 9609 S.W. 2 LANE MIAMI FL, 33174

The undersigned has(have) executed these Articles of Incorporation this 10th day of APRIL 1997

WILLIAM MIRANDA /PRESIDENT Signature/Title

Signature/Title

Signature/Title

## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Status, 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:	
2. The name and address of the registered agent and office is: WILLIAM MIRANDA -	
9609 S.W. 2 LANE (P.O.BOX NOT ACCEPTABLE)	
- MIAMI FL, 33174 (CITY/STATE/ZIP)	
SIGNATURE (CORPORATE OFFICE)	-1
TITLE PRESIDENT SS 22	म्बर्ग
	1
HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.	<b></b>
SIGNATURE Muauda	

**DATE** 04/10/97