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

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or: \$70 Filing		\$78.75 Filing Fee Cerdificate	\$122.50 Filing Fee & Certified Copy Additional Copy	s131.29 Filling Fee, Certified Cop & Certificate Y Required)y		
	FROM:		(printed or typed) 37 PALI	CIVERA SADES	Ro.		- -
	- -	941	Address	, FLA	339 TALLAHAS	97 NOV	, 二

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

ne 11/4/97

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:

EFREN J. RIVERA, INC

FILED

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SLOSLIAL SESTATE
FALLAHASSEE, FLORIDA

ARTICLE II C PRINCIPAL OFFICE

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

25437 PALISADES RO PUNTA GORDA, FLA 33983

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

EFREN J. RIVERA 25437 PALISADES RO PUNTA GORDA, 33983

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):

EFREN J. RIVERA 25437 PALISADES RO PUNTA GURDA, FLA 33983 111

Lizette Colon-Rivera 25437 Palisades Ped. Punta Golda, FCA 33983

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

29th day of October, 19 97.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

Notarization is not required

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 c	corporation is:	EF	REN	<u>J</u> .	RIVER	A	lose
	-			, -		٠	
2. The name and ad	dress of the regist	ered agent ar	nd office is:	:			
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	E FRE	(NA	ME)	ERA	A C	NOV .	<u> </u>
-	2543	7 F	ALISA	ORS	Rose SEE	ယ်	П
	(P.O. Box	or Mail Drop E	Box <u>NOT</u> ac	CEPTABLE)	LOR	ا الا	
	FUNTA	(CTTY/ST	CDA	FLA	33378	<i>3</i> 5	

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.

(SIGNATURE) (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314 "