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

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(Proposed corporate name - must include suffix)					
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Euclosed is all original a	and one(1) copy of the article	es of incorporation and a c	theck for :	า	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL COP	Y REQUIRED]	
FROM: _	Marlene 7	more on		V V V	
-	5449 NW	18 4 SF.		SECRETAR VISION OF	
	Miami Citý,	F-1. 33-055 State & Zip	Marian Landa de Caractería de	PN 4: 07	
_	(3 05) 6 Daytime Te	24- 9/05 elephone number		OT TONS	

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

4,11,5

ARTICLES OF INCORPORATION

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

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The name of the corporation shall be:

Investor Inc.

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	E.	2	THE STATE OF THE S

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 5449 NW 184 St.

Miami, F1 33055

SHARES $ARTICLE_III$

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

-1,000

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Marlene T. Morejon 8449 NW 184 Sty Miami, Fl. 33055

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Marlene T. Morejon 5449 NW 184 St. Miami, Fl. 33055

Signature/Incorporator

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

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

Nantine T. Moreyon
Signature/Registered Agent