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

500002761515---7 -02/02/39--01038--003 *****78.75 *****78.75

TAC SUBJECT: rate name - must include suffix) Proposed corp

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

2\$78.75 \$87.50 **\$70.00** \$78.75 Filing Fee, **Filing Fee** Filing Fee Filing Fee & Certified Copy Certified Copy & Certificate of Status & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Name (Printed or typed) N.E. 5860 Address 99 FEB - 2 33162 Nor City, State & Zip h :t Wd Daytime Telephone number

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

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.

ARTICLE I NAME

The name of the corporation shall be:

Pro Capital Investmen

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

15860 N.E. 14^{ct} North Miami Beach, FL 33162

ARTICLE III SHARES

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

ONE Thousand (1,000) Shares of Common Stock Having PAR Value of One Dollar (\$1.00) Each. INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and Florida street address of the initial registered agent are: JAMES Alabre 15860 N.E. 14CT North Miani Beach, FL 33162 JAMES Alabre ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are: 15860 N.E. 14CT North Miami Beach, FL Signature Incorporato

(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 staputes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position astregistered dgent

Signature/Registered Agent