Florida Department of State

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Division of Corporations

Fax Number : (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839

Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

GONEL COMPRESSOR SYSTEMS, INC.

Certificate of Status	i 0
Certified Copy	1
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ARTICLES OF INCORPORATION

OF

GONEL COMPRESSOR SYSTEMS, INC.



The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: GONEL COMPRESSOR SYSTEMS, INC.

The principal place of business of this corporation shall be: 4060 NW. 37TH. AVE., HIALEAH, FL., 33142

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 100 ALL OF WHICK SHALL BE COMMON SHARES (\$1.00) PER VALUE EACH.

<u>ARTICLE IV TERM OF EXISTENCE</u>

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

MARIA E. DIAZ

PRESIDENT

4060 NW. 37TH. AVE., HIALEAH, FL., 33142

PREPARED BY: CASTILLO & ASSOCIATES, INC. 542 SW. 12TH. AVE. MIAMI, FL., 33130 (305) 649-3403

ARTICLE VI INCORPORATOR(S)

The	name(s)	and	street	address(es)	of	the	incorporator(s)	to	this	articles	of
incor	poration is	s(are)):	, ,					** 110	a 40103	U

MARIA E. DIAZ

4060 NW. 37TH. AVE. HIALEAH, FL., 33142

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 7TH day of APRIL , 1999.

Signature(s) of Incorporator(s)

* Man E. Des

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

SO HR ON PORCE Pursuant to the provisions of Section 607.325, 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.

I. The name of the corporation GONEL COMPRESSOR SYSTEMS, INC.
2. The name and address of the registered agent and office is:
MARIA E. DIAZ - 4060 NW. 37TH. AVE.
(P.O. BOX NOT ACCEPTABLE)
HIALEAH, FL., 33142
(CITY/STATE/ZIP)
SIGNATURE × Marc E. Do (corporate officer)
TITLE PRESIDENT
DATEAPRIL 7TH, 1999

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.

SIGNATUI	RE X W	lace	<u></u>	<u> </u>	Daz
DATE	APRIL				