OFFICE ment (Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Rick up time 2,00 Walk in Certified Copy Mail out Will wait Certificate of Status Photocopy **AMENDMENTS NEW FILINGS** Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

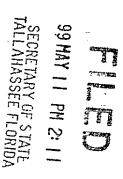
ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Norvest Investment Corporation



ARTICLE II PRICIPAL OFFICE

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

25 S.W. 29 Ave Miami, F1 33135

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 SRIEET ADDRESS

The name and address of the initial registered agent is:

Abelardo Sanchez 25 S.W. 29 Ave Miami, F1 33135

ARTICLE V INCORPORATOR(S)

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

Abelardo Sanchez 25 S.W. 29 Ave Miami, Fl 33135

ARTICLE VI DIRECTOR(S)

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

Abelardo Sanchez (P) 25 S.W. 29 Ave Miami, Fl 33135

The undersigned incorporator(s) has(have) executed these A Incorporation this	rticles 19 <u>99</u>	of _·
Incorporation this day of	2=	

Signature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

ne name and address of the registered agent and office is: Abelardo Sanchez (NAME)	
Abelardo Sanchez (NAME)	
(NAME)	
25 S.W. 29 Ave	
25 S.W. 29 Ave (P.O. BOX NOT ACCEPTABLE)	

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

REGISTERED AGENT FILING FEE: \$35.00