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FILED

TRANSMITTAL LETTER

99 OCT 11 PM 1:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-10/11/99--01079--014
*****78.75 *****78.75

SUBJECT: Growing Angels Corp.
(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

SAMI K. WARAH

Name (printed or typed)

1815 THE OAKS BLVD

Address

KISSIMMEE FL 34746

City, State & Zip

(407) 846-1182/595-2485

Daytime Telephone number

P/H 10/14/99

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

ARTICLES OF INCORPORATION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

~~SANTI~~ GROWING ANGELS, ~~LLC~~ ORP.

ARTICLE II PRINCIPAL OFFICE

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

1325 E. HWY 436

ALTIMONTE SPRINGS, FL 32701

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ROBERT DOWD

SWANSON & DOWD

801 NORTH MAGNOLIA #301

ORLANDO FL 32803

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):

SAMI K. WARAH

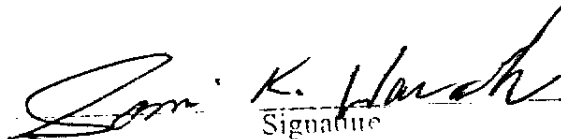
1815 THE OAKS BLVD.

KISSIMMEE, FL 34754
46

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

5 day of OCT, 1999

(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 corporation is:

Growing Angels Corp.

2 The name and address of the registered agent and office is

ROBERT DOWD

(NAME)

801 N. MAGNOLIA #301

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

ORLANDO FL 32803

(CITY/STATE/ZIP)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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]

(SIGNATURE)

10-5-99

(DATE)