FOOOGOO State 703

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)541-3694 Fax Number : (305)541-3770 OO JUN 30 AM 7: 1.1
SECRETARIASSEE, FLORIDA

8: 23

FOREIGN PROFIT QUALIFICATION

TEXTILESINTERNET, INCORPORATED

Certificate of Status	ì
Certified Copy	i
Page Count	07
Estimated Charge	\$87.50

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6/19/00 11:06 AM

1 of 2

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TRANSMITTAL LETTER

		1	rı	
SUBJE	CT:		INTERNET, INC."	
		(Name of corpo	ration - must include suffix)	
Dear Si	ir or Madam:			
The en	alaasa wa waliowa	be Ferrier Composition	Company of the second of the s	
"Certifi	icate of Existence	on by roteigh corporation. ", and check are submitted	for Authorization to Transacto register the above referen	n Business in Florida", aced foreign comoration
to trans	act business in F	lorida.	·	<u> </u>
Please 1	return all correspo	ondence concerning this m	atter to the following:	
		Leona	ardo F. Brito	TAIL SI
		(Nam	e of Person)	OO JUN 30 AM SECRETARY OF LLAHASSEE, F
		Latin Amer	ican Access, Corp.	
		(Firm	(Company)	
÷	ı	4770 Biscay	ne Blvd., Suite 70	
		(A	ddress)	8: 2 STATI LORII
		Miami,	Florida 33137	Sm &
		(City	/State/Zip)	
		•		
Should	you need to call s	omeone concerning this m	atter, please call:	
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	-	.dez at (30!	-	ne Number)
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B.	etty Hernan (Name of Person	dez at (30!	5) 372-8959 ea Code & Daytime Telepho MAILING ADDRESS	· :
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STREE Qualific Division 409 E. C Tallahas Enclose	etty Hernan (Name of Person TADDRESS: cation/Tax Lien S n of Corporations Gaines St. ssee, FL 32399 d is a check for th	dez at (30: (A) ection de following amount:	mailing address Qualification/Tax Lien Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Section as
STREE Qualific Division 409 E. C Tallahas Enclose	etty Hernan (Name of Person T ADDRESS: cation/Tax Lien S n of Corporations Gaines St. ssee, FL 32399 d is a check for the	at (30)	5 372-8959 rea Code & Daytime Telepho MAILING ADDRESS Qualification/Tax Lien Division of Corporation P.O. Box 6327	Section

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIA REGISTER A	NCE WITH SECTION 607.1503, FLORIDA FOREIGN CORPORATION TO TRANSAC "TEXTILESINTERNET,	OA STATUTES, THE FOLLOWING IS SUBMITTED TO COT BUSINESS IN THE STATE OF FLORIDA.	
(Name of co	moration: wrunt in al., d	RATED", "COMPANY", "CORPORATION"	-
2. <u>Del</u> (State of coun	aware try under the law of which it is incorporated)	_ applied for	
4. June I	2, 2000	(FSI number, if applicable) perpetual	
6 July	8, 2000 (D	Duration: Year corp. will coase to existor "perpetual")	
(Date fi 7477	st transacted business in Florida.) (SEE SECTION BISCAYNE Blvd, Suite 700,	TIONS 607.1501.607.1502 and 817.155.F.S.)), Miami, FL 33137	
	(Current mailing addr	dress)	
°- <u>Ger</u> (Puipose	eral Corporation (s) of corporation authorized in home state or co	Country to be carried out in one of the	
9. Name and st	reet address of Florida registered agent:	: (P.O. Box or Mail Drop Box NOT acceptable)	;
Name:	Leonardo F. Brito	JUN 30 AHASSETARY 20 20 20 20 20 20 20 20 20 20 20 20 20 2	
Office Address:	4770 Biscayne Blvd. Suite	SSE 700 SSE 700 AM	רונט
	Miami	, Florida 3 3 1 3 7	
10. Registered a	gent's acceptance:	(Zip code)	
Having been name this application, I have the provisions the obligations of m	d as registered agent and to accept service of p. ereby accept the appointment as registered age of all statutes relative to the proper and compl. ey position as registered agent	process for the above stated corporation at the place designated gent and agree to act in this capacity. I further agree to comply plete performance of my duties, and I am familiar with and acce	in pt
	(Registered agent's sig	•	
 Attached is a ce 	tificate of existence duly authenticated, not may	are then 00 to	

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: ___ Vice Chairman: Address: Director: ___ B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: __Alfonso Tames Address: Villa Escorial # 7, Paseos de las Palmas Huixquilucan, edo. de Mexico, Mexico 52788 Vice President: _Carlos Menendez Address: 3926 194th Lane, Sunny Isles Beach, Florida 33160 Secretary: Andres Obregon Address: Paseo de Primaveras 144 Bosques de Las Lomas Mexico City, 05000, Mexico Treasurer: Daniel Kalch Address: Bosques de Reforma #715, Bosques de la Lomas Mexico City, 11700, Mexico NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Vice President (Typed or printed name and capacity of person signing application)

H00000032670 State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TEXTILESINTERNET, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF JUNE, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



Edward J. Freel, Secretary of State

0526076

AUTHENTICATION:

06-27-00

DATE:

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