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FILED
00 JUN 22 AM 11:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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*****78.75 *****78.75

June 19, 2000

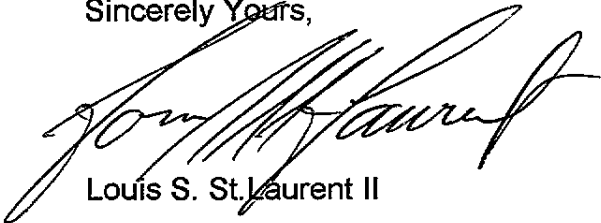
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: ALLIANCE POWER & FORESTS CORPORATION, INC.

Dear Sir or Madame:

Please find enclosed an original and one(1) copy of the articles of incorporation and a check in the sum of \$78.75 for the filing fee and certificate.

Sincerely Yours,



Louis S. St. Laurent II

LSL:ef
enclosures

Per [unclear]

ARTICLES OF INCORPORATION OF
ALLIANCE POWER & FORESTS CORPORATION, INC.

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ARTICLE I NAME

The name of the corporation shall be:

ALLIANCE POWER & FORESTS CORPORATION, INC.

ARTICLE II PRINCIPAL OFFICE

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

Suite 7
2117 Hollywood Boulevard
Hollywood, Florida 33020

ARTICLE III PURPOSE(S)

The corporation shall have all the powers of corporations for profit under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares of common stock at \$1.00 par value

ARTICLE V INITIAL DIRECTOR

The initial members of the Board of Director and their addresses are as follows:

SIMON FRECHETTE
Suite 7
2117 Hollywood Boulevard
Hollywood, Florida 33020

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

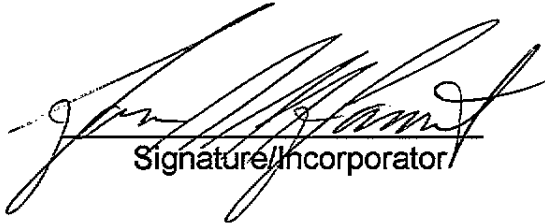
The name and street address of the initial registered agent is:

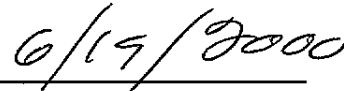
Louis S. St.Laurent II, 220 N.W. 122 Avenue, Coral Springs, Florida 33071

ARTICLE VII INCORPORATOR

The name and street address of the Incorporator to these Articles of Incorporation is:

Louis S. St.Laurent II, 220 N.W. 122 Avenue, Coral Springs, Florida 33071


Signature/Incorporator


Date

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/Registered Agent


Date