

**P02000046921**

**Florida Department of State  
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To: Division of Corporations  
Fax Number : (850)205-0381

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346

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**02 APR 29 AM 8:15**  
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**TALLAHASSEE, FLORIDA**

**FLORIDA PROFIT CORPORATION OR P.A.**  
**PROFESSIONAL VISA, INC.**

Certificate of Status	0
Certified Copy	1
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ARTICLE OF INCORPORATION  
OF  
PROFESSIONAL VISA, 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:

PROFESSIONAL VISA, INC.

The principal place of business of this corporation shall be:

PROFESSIONAL VISA, INC.  
7372 NW 12 STREET  
MIAMI, FLORIDA 33126.

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TALLAHASSEE, FLORIDA

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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:

One Thousand shall of common stock at one dollar par value.

ARTICLE IV TERM OF EXISTENCE.

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):

President : Sergio Saladrigas  
7372 NW 12 STREET  
MIAMI, FLORIDA 33126.

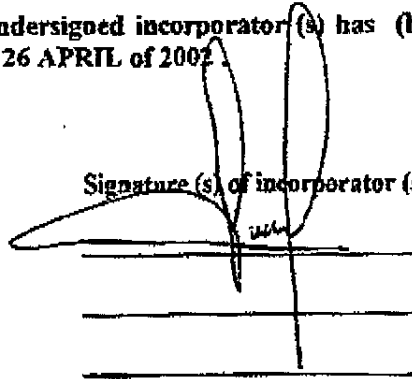
ARTICLE VI INCORPORATOR (S)

The name (s) and street address (e s) of the incorporator (s) to this articles of incorporation is (are):

Sergio Saladrigas  
7372 NW 12 STREET  
MIAMI, FLORIDA 33126.

IN WITNESS WHEREOF, The undersigned incorporator (s) has (have) executed these Articles of incorporation this 26 APRIL of 2002.

Signature (s) of incorporator (s)



**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE.**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under The laws of the State of Florida, submit 's the following statement in designating the registered office/registered agent, in the State of Florida

1. The name of the corporation:

PROFESSIONAL VISA, INC.

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

Sergio Saladrigas  
7372 NW 12 STREET  
MIAMI, FLORIDA 33126.

SIGNATURE 

TITLE : PRESIDENT

DATE : 04/26/2002

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 DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE 

DATE \_\_\_\_\_

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