

FROM : (305) 639-4737

PHONE NO : 8256 8473

Aug. 08 2006 2:11PM P1

P06000103698

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H06000198976 3)))



H060001989763ABCD

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : PROFESSIONAL VISA, INC.
Account Number : I20020000173
Phone : (305) 639-4737
Fax Number : (305) 639-4725

FILED
06 AUG -8 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

Professional Florida Institute, Corp.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

[Handwritten signature]

FROM : (305) 639-4725

PHONE NO. : 3056394725

Aug. 08 2006 12:11AM P2

{{(406000198976 3)}}

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Professional Florida Institute, Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address is:

7220 NW 36 Street, suite 315
Miami, FL 33166

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any or all lawful activities or business permitted under the laws of The United States, the State of Florida, or any others states, country, territory, or nation.

ARTICLE IV SHARES

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is one hundred shares at ten-dollar par value.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name, address and title:

President: Sergio Saladrigas
7220 NW 36 Street, suite 315
Miami, FL 33166

ARTICLE VI REGISTERED AGENT

The name and Florida Street address of the registered agent is:

Sergio Saladrigas
7220 NW 36 Street, suite 315
Miami, FL 33166

FILED
06 AUG-8 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

{{(406000198976 3)}}

FROM : (385) 639 4725

PHONE NO. : 3056394725

Aug. 08 2006 12:12AM P3

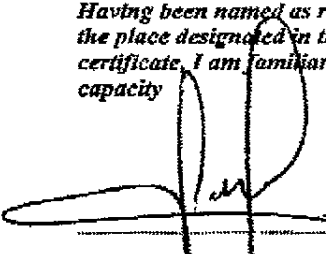
06 ((H06000198976 3)))
FILED
AUG-8 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

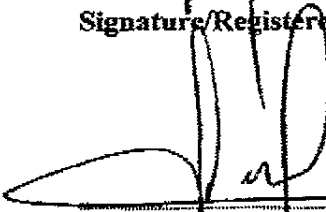
Sergio Saladrigas
7220 NW 36 Street, suite 315
Miami, Fl 33166

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

Date 08/08/2006



Signature/Incorporator

Date 08/08/2006

((H06000198976 3)))