

F00000006197

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INVERSIONES LORIE, S.A. CORPORATION
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation
to transact business in Florida.

Please return all correspondence concerning this matter to the following: 4000003447284-1
-11/01/00-01075-001
*****70.00 *****70.00

John L. Hofmann

(Name of Person)

JL Hofmann & Associates, P.A.

(Firm/Company)

329 Granello Avenue

(Address)

Coral Gables, Florida 33146

(City/State and Zip code)

For further information concerning this matter, please call:

John L. Hofmann

at (305) 461-4400

(Name of Person)

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

mt
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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. INVERSIONES LORIE, S.A. CORPORATION

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. British Virgin Islands

(State or country under the law of which it is incorporated)

3. 52-2254986

(FEI number, if applicable)

4. 07/21/99

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 01/01/2000

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 185 S.E. 14th Terrace, Suite 711, Miami, FL 33131 c/o Leo Icovicks

(Principal office address)

329 Granello Avenue, Coral Gables, FL 33146

(Current mailing address)

8. Investments in Real Estate

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: United States Registered Agents, Inc.

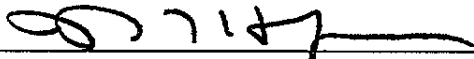
Office Address: 329 Granello Avenue

Coral Gables, Florida
(City)

33146
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

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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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Efim Ayzenshtat

Address: Av. Ataulfo de Paiva, 221 Ap. 202

Leblon, 22440-030, Rio de Janeiro, Brazil

Director: _____

Address: _____

B. OFFICERS

President: Efim Ayzenshtat

Address: Av. Ataulfo de Paiva, 221 Ap. 202

Leblon, 22440-030, Rio de Janeiro, Brazil

Vice President: _____

Address: _____

Secretary: _____

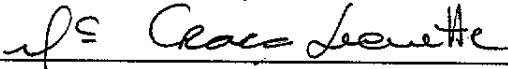
Address: _____

Treasurer: _____

Address: _____

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TALLAHASSEE, FLORIDA

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.


13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

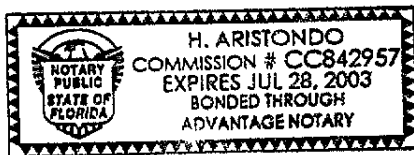
14. Maria da Graca Leonette, Attorney
(Typed or printed name and capacity of person signing application)

CERTIFICATE

I, Hildie Aristondo, hereby affirm that appended hereto is a true and correct copy of the Certificate of Incorporation of Inversiones Lorié S.A., a British Virgin Islands corporation.

IN WITNESS WHEREOF, I have set my hand and seal, this 12th day of October, 2000.


Hildie Lorie-Aristondo
Notary Public - State of Florida



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TALLAHASSEE, FLORIDA

TERRITORY OF THE BRITISH VIRGIN ISLANDS

THE INTERNATIONAL BUSINESS COMPANIES ACT
(CAP. 291)

CERTIFICATE OF INCORPORATION (SECTIONS 14 AND 15)

No. 335342

The Registrar of Companies of the British Virgin Islands **HEREBY CERTIFIES**
pursuant to the International Business Companies Act, Cap. 291 that all
the requirements of the Act in respect of incorporation having been satisfied,

INVERSIONES LORIE S.A.

is incorporated in the British Virgin Islands as an International Business
Company this 21st day of July, 1999.



Given under my hand and seal at
Road Town, in the Territory of the
British Virgin Islands

SECRETARY OF STATE
TALLAHASSEE, FL

[Signature]
REGISTRAR OF COMPANIES

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