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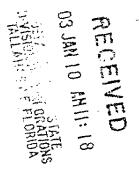
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TERESA ROMAN (TALLAHASSEE REPI	RESENTATIVE)			
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CORPORATION NAME(s) & DOC	CUMENT NUME	BER(S) (if known):		
1. SABER INC				<del></del> ·
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Examiner's Initials

### ARTICLES OF INCORPORATION

**FOR** 

SABER INC

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

#### ARTICLE I NAME:

The name of the corporation shall be:

SABER INC

#### ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

3990 W Flagler # 500 Miami FL 33134

#### ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):

Provide Education, Social services, and Rehabilitation services

#### ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

The manner in which the directors are elected or appointed is as follows:

Election for a committee and mayority votes.

2000 JAN 10 FN 2: 0.

#### ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided the section 617.0302, Florida Statutes, unless limited as follows:

N/A

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

Josefina Habif 3990 W Flagler # 500 Miami, FL 33134

ARTICLE VII DIRECTORS (must have the minimum of three directors): NAME AND ADDRESS

Josefina Habif 3990 W Flagler #500 Migmi FL 3313 Fernando Obeso 3990 W Flagler #500 Migmi FL 3313 Maria Cristina Palacios 3990 W Flagler #500 Hiemit 33134

#### ARTICLE VIII INCORPORATOR

The name and street address of the incorporator for these Article of Incorporator is:

Josefina Habif 3990 W Flagler # 500 Miami FL 33134

The undersigned incorporator has executed these Articles of Incorporation this 01 day of January, 2003

signature X

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

3	The	name	of the	corpoi	nnite	ie
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2. The name and address of the registered agent and office is:

Miami FL 33134 - (CITY/STATE/ZIP)

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) 01-01-2003 (DATE)

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