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LOCAL REPRESENTATIVE TALLAHASSEE

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 -04/29/99--01075--005
 *****78.75 *****78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

- IGLESIA BAPTISTA LIBRE ALBEDRIO
 (Corporation Name) (Document #)
- SHALOM Inc
 (Corporation Name) (Document #)
- _____
 (Corporation Name) (Document #)
- _____
 (Corporation Name) (Document #)

- Walk in Pick up time 2:00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

SECRETARY OF STATE
 TALLAHASSEE FLORIDA
 99 APR 29 PM 1:49

FILED

NEW FILINGS	
<input type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF INCORPORATION

FOR

IGLESIA BAUTISTA LIBRE ALBEDRIO " SHALOM " INC.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

IGLESIA BAUTISTA LIBRE ALBEDRIO " SHALOM " INC.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

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

575 WEST 69 St Apt# 308
Hialeah, Fl 33014

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):
THIS NON PROFIT ORGANIZATION WILL BE DEDICATED SOLELY TO THE FOURPOSE OF FOLLOWING
THE WORD OF GOD AND THE BIBLE

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

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

BY ITS MINUTES AND BYLAWS

ARTICLE V LIMITATION OF CORPORATE POWERS

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

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

NELVA MARTIN
55 NW 48 PL
MIAMI, FL. 33126

ARTICLE VII INCORPORATORS

The name(s) and street address(es) of the incorporator(s) for these Articles of Incorporation is(are):

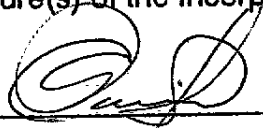
ADOLFO PANDIELLO GONZALEZ, PRES.
575 W 69 St # 308
Hialeah, Fl 33014

A SELA VALLE, TREASURER
355 West 16 St
Hialeah, Fl 33010

REINERIO VALLE HERNANDEZ
355 East 16 St
Hialeah, Fl 33010

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
8 day of April, 19 99.

Signature(s) of the Incorporator(s)



ADOLFO PANDIELLO GONZALEZ, PRES.
Typed name of incorporator signing



REINERIO VALLE HERNANDEZ, SECRETARY
Typed name of incorporator signing



A SELA VALLE TREASURER
Typed name of incorporator signing

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 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.

1. The name of the corporation is: IGLESTIA BAUTISTA LIBRE ALBEDRIO " SHALOM " INC.

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

NELVA MARTIN, 55 NW 48 PL, MIAMI, FL. 33126

(NAME)

(P.O. BOX NOT ACCEPTABLE)

(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 Nelva Martin

DATE 4-8-99

99 APR 29 PM 1:49
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

REGISTERED AGENT FILING FEE: \$35.00