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Dalia Accounting Service, Inc.

January 12h, 2000

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

900003038829--0 -01/14/00--01046--020 *****78.75 *****78.75

Re:

Articles of Incorporation

Millennium Insurance & Travel, Inc.

Enclosed you will find check in the amount of \$78.75 which pays the filing fee, resident agent fee, and certified copy of the Articles of Incorporation.

It would be greatly appreciated if you please send the Articles of Incorporation to our office at the below shown address.

Should you have any questions, please feel free to contact our office.

Sincerely yours,

DALIA ACCOUNTING SERVICE INC.

Elizabeth Gonzalez

561-478-1777

DIVISION OF CORPORATIONS

680 South Military Trail., West Palm Beach, FL 33415

& IBAILOO

ARTICLE OF CORPORATION

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

OF

00 JAN 14 PH 3: 35

MILLENNIUM INSURANCE & TRAVEL, INC.

ARTICLE I

NAME

The name of this Corporation shall be:

MILLENNIUM INSURANCE & TRAVEL, INC.

ARTICLE II

PURPOSE

This corporation is organized for the purpose of operating as Insurance & Travel any all-lawful business.

ARTICLE III

CAPITOL STOCK

This corporation is authorized to issue 1,000 shares of \$1.00 par value common stock.

ARTICLE IV

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT.

The street address of the initial principal office and registered office of this corporation is 4349 10th, AVE. NORTH., LAKE WORTH, FL 33460 and the name of the initial registered agents of this corporation at the above address is:

IRMA ROLFO

ARTICLE V

DIRECTORS

This corporation shall have one (1) President and one (1) Vice-President, The number of Directors may be either increased or diminished from time to time by-laws but shall never be less than one. The name and address of the initial Director (s) of this corporation

IRMA ROLFO - PRESIDENT

4309 GULFSTREAM RD. LAKE WORTH, FL 33461

JESSICA ROLFO - VICE-PRESIDENT

4309 GULFSTREAM RD. LAKE WORTH, FL 33461

ARTICLE VI

The name and address of the person (s) signing these Articles are:

IRMA ROLFO - PRESIDENT

4309 GULFSTREAM RD. LAKE WORTH, FL 33461

JESSICA ROLFO - VICE-PRESIDENT

4309 GULFSTREAM RD. LAKE WORTH, FL 33461

ARTICLE VII

POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

ARTICLE VIII

INDEMNIFICATION

The corporation shall indemnify any officers, directors or former officers, and former directors to the full extent permitted by law.

ARTICLE IX

AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation. IN WITNESS WHERE OF, the undersigned subscribers have executed these Articles of Incorporation on this JANUARY 10th, 2000.

IRMA ROLFO, PRESIDENT.

JESSICA ROLFO, VICE-PRESIDENT

COUNTY OF PALM BEACH STATE OF FLORIDA

BEFORE ME, the undersigned authority, this day personally appeared IRMA ROLFO and JESSICA ROLFO after being duly sworn, depose and say that the facts contained above are true and correct, and that he has executed the same for the purposes contained herein.

WITNESS my hand and official seal this JANUARY 10th, 2000.

DALIA MELENDEZ

NOTARY PUBLIC, STATE OF FL. COMMISION INFORMATION:

FILED SECRETARY OF STATE CIVISION OF CORPORATIONS

00 JAN 14 PM 3: 35

CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED. IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES.

THE FOLLOWING IS SUBMITTED:

MILLENNIUM INSURANCE & TRAVEL, INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.WITH IT'S PRINCIPAL PLACE OF BUSINESS 4349 10TH, AVE. NORTH LAKE WORTH, FL 33460 COUNTY OF PALM BEACH, STATE OF FLORIDA AS IT'S AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

CORPORATE OFFICER

PRESIDENT

TITLE

01/10/00

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT OF SAID CORPORATION, AND I HEREBY COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF OUR DUTIES.

SIGNATURE

DATE OU/10/00