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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335

Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

MOLINTOURS, INC.

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 26, 2000

FAS-T

SUBJECT: MOLINTOURS, INC.

REF: W00000001204

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ARTICLES OF INCORPORATION

Of

00 JAN 26 PH 4: 48

MOLINTOURS, INC.

(name of corporation)

<u>SECRETARY OF STATE</u> TALLAHASSEE, FLORIDA

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of State of Florida

ARTICLE 1 - CORPORATE NAME

The name of the corporati MOLINTOURS, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue One hundred_shares (100) of five. Dollar (s) (\$_5.00_) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and name of the Initial Registered Agent at that office is:

NAME	JUAN G. MOLINA		
ADDRE	SS 426 8W 17 AVE		
CITY	MIAMI	FLORIDA	ZIP 33135

The principal office, if known, or the mailing address of the corporation is:

NAME	JUAN G. MOLINA		
ADDRE	SS 426 SW 17 AVE		
CITY	MAMI	FLORIDA	ZIP 33135

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ___One (_1_) directors initially. The number of directors may be either in creased or diminished from time to time by-laws, but shall never be than one (1). The name and addresses of the initial director (s) of the corporation are as follows.

NAME	JUAN G. MOLINA				
ADDRES	SS 425 SW 17 AVE				
CITY	MIAM	STATE	FLORIDA	ZIP	33135
NAME					
ADDRES	SS				
CITY		STATE		ZIP	

H00000002216 0

NAME		· · · · · · · · · · · · · · · · · · ·	
ADDRESS			
CITY	STATE	ZIP	
NAME			
ADDRESS		· · · · · · · · · · · · · · · · · · ·	
CITY	STATE	ZIP	

ARTICLE VII - INCORPORATORS

The name and addresses of the incorporators signing thesse Articles of Incorporation are as follows.

NAME JUAN G. MOLINA		
ADDRESS 426 SW 17 AVE		
CITY MIAMI	STATE FLORIDA	ZIP 33135
NAME		
ADDRESS		
CITY	STATE	Sib
NAME		***
ADDRESS		
CITY	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP

IN WITNESS WHERE OF, the undersigned subscriber (s) have executed these Articles of Incorporation this 12 th day of JANUARY, 2000.

PREPARED: SOSA ACCOUNTING TAX SERVICE

570 E 49 ST HIALEAH, FL 33013

(305) 688-1716

(306) 688-1714

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

MOLINTOURS, INC.

(name of corporation)

Pursuant to Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation.

AT:	425 SW 17 AVE
	MIAMI, FLORIDA 33135.
has named	JUAN G. MOLINA
located at the afo	resaid address, as its Registered Agent to accept service of processwithin this

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept services of process for the above state corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with provisions of Florida Lawn in Keeping open said office.

(registered agent)