DOOODSIST 8

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 700003232837--2 -05/01/00--01102--005 ******78.75 ******78.75

SUBJECT:(Pro	posed corporate n	ame - must include su	kport-tm	jort Corporedi	gv.
Enclosed is an original afor: \$70.00 { Filling Fee	**************************************	py of the articles of \$122.50 Filing Fee & Certified Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate	and a check	£
FROM:	120	Becerra (printed or typed) 04 NW 43 A Address	Ar Apt. 1 F	FILED NAY 25 PM 1: 06 ALLAHASSEE, FLORIDA	
	(305)	<i>Fl.</i> 33126 by, State & Zip 648 - 2488 Telephone number	ź		-

NOTE: Please provide the original and one copy of the articles.



May 2, 2000

LYDIA BECERRA 1204 N.W. 43 AVE.,APT.1F MIAMI, FL 33126

SUBJECT: H. B. CORPORATION Ref. Number: W00000011490

We have received your document for H. B. CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6930.

Carolyn Batten Document Specialist

Letter Number: 800A00024214

ARTICLES OF INCORPORATION

OO MAY 25 PM 1: C

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Bu Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE

The name of the corporation shall be:

H. B. Expert- Empart Corporation

PRINCIPAL OFFICE ARTICLEII

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

1204 NW 43 Ave Apt. 1F MIONE. Fl. 33126

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time 100 - NO PAR VALUE

INITIAL REGISTERED AGENT AND STREET ADDRESS **ARTICLE IV** The name and address of the initial registered agent is:

Lydia Becarra 1204 NW 43 Are Apr 12F Miami. Fl. 33126

INCORPORATOR(S) ARTICLE V

See instructions for officers/directors

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

Lydia Becerra 1204 NW 43 Are April 1 F Mianu F/ 33126

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

22/ day of April , 19 2000.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

The name of the corporation is:	H. B. Expert- In	port Corporation	4
2. The name and address of the registe	ered agent and office is: (NAME)	OO WAY 25 TALLAHASSI	*
_	x or Mail Drop Box NOT ACCEPTABLE)	- PRINCE DE LE PRI	
1204 NU (P.O. Box		25 PM 1: 06 25 PM 1: 06	

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) | April 24, 2000 (DATE)