Florida Department of State

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

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To:

Division of Corporations

: (850) 922-4001

From:

Account Name

: FAS-T CORP. AGENTS, INC.

Phone

Account Number: 071001002335

: (305)599-0839

Fax Number

: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

XPLORAR.COM INC

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Certificate of Status	0
Certified Copy	1
Page Count	03
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 12, 2000

FAS-T

SUBJECT: XPLORAR.COM INC

REF: W00000022255

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

CANT READ THE REGISTERED AGENTS NAME ON THE CERTIFICATE PAGE.

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Neysa Culligan Document Specialist FAX Aud. #: H00000047760 Letter Number: 500A00048051 Carly Mary

ARTICLES OF INCORPORATION

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XPLORAR. COM INC

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

<u>ARTICLE LNAME</u>

The name of the corporation shall be: XPLORAR. COM INC.

The principal place of business of this corporation shall be: 6250 NW 173 ST SUITE 303 MIAMI FL 33015

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: TWO HUNDRED SHARES AT ONE DOLLAR (1.00) PER SHARE.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

SABRINA HERNANDEZ

6250 NW 173 ST SUITE 303 MIAMI FL 33015

JOSE YINKO

6250 NW 173 ST SUITE 303 MIAMI FL 33015

SECRETARY OF STATE
DIVISION OF CORPORATIONS

ON SEP 12 PM 2:1.1

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ARTICLE VI INCORPORATOR(\$)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are).

SABRINA HERNANDEZ

6250 NW 173 ST SUITE 303 MEAMI PL 33015

JOSE YINKO

6250 NW 173 ST SUITE 303 NIAMI FL 33015

IN WITNESS WHEREOF, the undersigned incorporator(s) has(have) executed these Articles of Incorporation this 11 day of <u>september</u>, 2000.

Signature(s) of Incorporator(s)

SABRINA HERNANDEZ

CERTIFICATE OF DESIGNATION 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 corporat	ion is: <u>X</u>	PLORAR. COM INC
ì. 7	The name and address of	the regi	stered agent and office is:
	SABRINA HERNANDEZ		
	6250 NW 173 ST SUITE	303 MIAM	I FL 33015
	e de la marca de la marca.	SIGHATU	ar St
	· · · · · · · · · · · · · · · · · · ·		SABRINA HERNANDEZ
	,	TITLE _	PRESIDENT
	- New	DATE 0	9-11-2000

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 AGREED TO COMPLY HITE THE PROVISIONS OF ALL STATUTES RELATING TO THE THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND A AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

1/517t

FILED SECRETARY OF STATE DIVISION OF CORPORATION