Florida Department of State

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

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To:

Division of Corporations

Fax Number

: (850)922-4001

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.

### EMPOWERMENT TRAINING CORP.

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# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 15, 2000

FAS-T

SUBJECT: EMPOWERMENT TRAINING CORP.

REF: W00000027260

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#### THE ARTICLES ARE TOO DARK

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#### ARTICLES OF INCORPORATION

OF

# EMPOWERMENT TRAINING CORP.

THE UNDERSIGNED has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

#### EMPOWERMENT TRAINING CORP.

#### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

#### ARTICLE III

The general nature of the business and objects and purpose proposed to be transacted and carried on by this corporation are to do any and all of the things relative to the strategic communications training, as fully and to the same extent as natural persons might do, viz:

PREPARED BY: ANA DALMAU ARES 3636 SW 87TH AVE. MIAMI, FL. 33165

(1) Transact any and all lawful business.

(2) Said corporation shall further have powers:

To have perpetual succession by its corporate name,

shall be only one (1) class of stock of this corporation.

### EMPOWERMENT TRAINING CORP.

#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of US\$10.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there

#### ARTICLE V

The name and street address of the initial Registered Agent of this corporation shall be:

MARIA CRISTINA CANICOBA 3801 INDIAN CREEK DR. # 305 MIAMI BEACH, FL. 33140

The principal office shall be:

3801 INDIAN CREEK DR. # 305 MIAMI BEACH, FL. 33140

#### ARTICLE VI

The Shareholders of this Corporation shall be as follows:

EMPOWERMENT CORP. AVENIDA CORRIENTES 1515 - 7mg.C (1042) BUENOS AIRES, ARGENTINA	50% SHAREHOLDER	
MARIA CRISTINA CANICOBA 3801 INDIAN CREEK DR. #305 MIAMI BEACH, FL. 33140	45%	44
DANIEL EDUARDO OJUNIAN 3801 INDIAN CREEK DR. # 305 MIAMI BEACH, FL. 33140	S%	u

The initial Board of Directors of this Corporation shall be composed by (3) three persons, as follows:

MANUEL HERNANDEZ AVENIDA CORRIENTES 1515 – 7mo C (1042) BUENOS AIRES, ARGENTINA

PRESIDENT

MARIA CRISTINA CANICOBA 3801 INDIAN CREEK DR. # 305 MIAMI BEACH, FL. 33140

VICEPRESIDENT

DANIEL EDUARDO OJUNIAN 3801 ENDIAN CREEK DR. #305 MIAMI BEACH, FL. 33140

SECRETARY

The name and address of the incorporator executing these Articles of Incorporation is:

MARIA CRISTINA CANICOBA 3801 INDIAN CREEK DR. # 305 MIAMI BEACH, FL. 33140

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this  $15^{TR}$  day of November , 2000.

MARIA CRISTINA CANICOBA VICEPSESIDENT

Gristine Camrola

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the law of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

I. The Name of the Corporation is:

EMPOWERMENT TRAINING CORP.

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

MARIA CRISTINA CANICOBA 3801 INDIAN CREEK DR. # 305 MIAMI BEACH, FL. 33140

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:

MARIA CRISTINA CANICOBA

DATE

11/15/2000

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