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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.

MASTER ASSURANCE ENTERPRISES INC.

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 30, 2000

FAS-T

SUBJECT: MASTER ASSURANCE ENTERPRISES INC

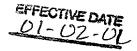
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ARTICLES OF INCORPORATION OF MASTER ASSURANCE ENTERPRISES INC.



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.

ARTICLE I NAME

The name of the corporation shall be MASTER ASSURANCE ENTERPRISES INC., The principal place of business of this corporation shall be:

400 SW 107 AVE SUITE #3 Miami Florida, 33174.

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, county, 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: 500 shares per \$1.00.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

This Corporation will be effective January 2nd, 2001.

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):

PRESIDENT: MARIA EUGENIA CISNEROS

1925 S.W. 118TH CT. #135 MIAMI, FL 33175

DIRECTOR: ALCIDES A. CISNEROS

1925 S.W. 118TH CT. #135 MIAMI, Fl 33175

ARTICLE VI INCORPORATOR(S)

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

MARIA EUGENIA CISNEROS 1925 S.W. 118TH CT. #135 MIAMI, FL 33175

ALCIDES A. CISNEROS 1925 S.W. 118TH CT. #135 MIAMI, FL 33175

IN WITNESS WEREOF, the undersigned incorporator (s) has (have) executed these Articles of incorporation this 30th day of November, 2000.

Signature(s) of Incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325 Florida Statute, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in designati the registered office/registered agent, in the State of Florida.

1. The name of the corporation: MASTER ASSURANCE ENTERPRISES INC.

The name and address of the registered agent and office is:

MARIA EUGENIA CISNEROS 1925 S.W. 118TH CT. #135 MIAMI, FL 33175

SIGNATURE

TITLE: President

DATE:

11-30-00

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE:

DATE:

11-30-00