

TRANSMITTAL LETTER

PO1000001192

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: ALEJANDRO NET FINANCE AND INVESTMENTS CORPORATION (AFICNET CORP.)  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

800003512428--0  
-12/26/00--01023--003  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: AFIC NET CORP.  
Name (Printed or typed)  
8283 NW 64th ST, UNIT # 2  
Address  
MIAMI, FLORIDA 33166  
City, State & Zip  
786 -845-8103  
Daytime Telephone number

FILED  
00 DEC 26 AM 9:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Feb  
1/4

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

AFIC NET CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

8283 NW 64th ST, MIAMI, FLORIDA 33166  
UNIT #2

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

IMPORT AND EXPORT OF PRODUCTS

ARTICLE IV SHARES

The number of shares of stock is:

ONE THOUSAND (1000)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

FELIPE CARRACEDO , LEOPOLDO URIARTE BONILLA  
8283 NW 64th ST, UNIT #2  
MIAMI, FL 33166

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

LEOPOLDO URIARTE BONILLA  
8283 NW 64th ST, UNIT #2  
MIAMI, FL 33166

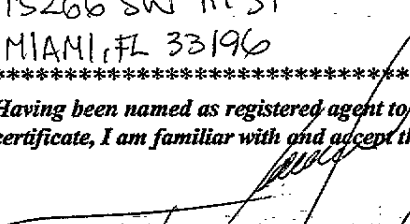

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CARLOS MAZZINI  
15266 SW 111 ST  
MIAMI, FL 33196

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*  
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

12/18/00  
\_\_\_\_\_  
Date  
  
12/18/00  
\_\_\_\_\_  
Date