

# P01000035176

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850) 922-4001

**From:**

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

## FLORIDA PROFIT CORPORATION OR P.A.

HALCOM USA, INC.

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

April 5, 2001

EMPIRE

SUBJECT: HALCOM USA, INC.  
REF: W01000007719

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**ARTICLES OF INCORPORATION OF**

**HALCON USA, INC**  
a Florida Corporation

**ARTICLE I: NAME**

The name of this corporation is:

**HALCON USA, INC.**

**ARTICLE II: DURATION**

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

**ARTICLE III: PURPOSE**

The corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.

**ARTICLE IV: CAPITAL STOCK**

This corporation is authorized to issue sixty (60) shares of NO PAR VALUE common stock, which shall be designated "Common Stock".

Prepared by: Roberto F. Fleitas, Esquire  
782 N.W. Lejeune Road, Suite 530  
Miami, Florida 33126  
(305) 442-1439  
Florida Bar No. 273546

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**ARTICLE V: PREEMPTIVE RIGHTS**

Every shareholders, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rate share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE VI: INTIAL REGISTERED OFFICE AND AGENT**

The street address of the principal office of this corporation is:

782 N.W. Lejeune Road  
Suite 530  
Miami, Florida 33126

The name of the initial registered agent of this corporation is:

Roberto F. Fleitas, Esquire

**ARTICLE VII: INITIAL BOARD OF DIRECTORS**

This corporation shall have ONE ( 1) director(s), Initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than one (1). The name(s) and address(es) of the initial director(s) of this corporation is (are):

Saturnino Montalvo  
Maestro Vives 1  
12110 Alcora  
Castellon, Espana

**ARTICLE VIII: INDEMNIFICATION**

*The corporation shall indemnify any officer or director, or any formal officer or director, to the full extent permitted by law.*

**ARTICLE IX: INCORPORATORS**

The name and address of the person(s) signing these articles of incorporation is (are):

Roberto F. Fleitas, Esquire  
782 N.W. Lejeune Road  
Suite 530  
Miami, Florida 33126

IN WITNESS WHEREOF, the undersigned subscriber(s) has (have) executed these Articles of Incorporation this 4th day of April, 2001.

  
\_\_\_\_\_  
ROBERTO F. FLEITAS

STATE OF FLORIDA  
COUNTY OF DADE

The foregoing instrument was acknowledged before me on this 4th day of April, 2001 by ROBERTO F. FLEITAS who is personally known to me or who have produced \_\_\_\_\_ as identification and who did take an oath.

  
\_\_\_\_\_  
Notary Public, State of Florida  
My Commission Expires:

OFFICIAL NOTARY SEAL  
JESUS F. BUJAN  
NOTARY PUBLIC STATE OF FLORIDA  
COMMISSION NO. CC950241  
MY COMMISSION EXP. JUNE 28, 2004

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR  
THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING  
AGENT UPON WHOM SERVICE OF PROCESS MAY BE EFFECTIVE**

**HALCON USA, INC.**

IN COMPLIANCE with Section 607.034 of the Florida Statutes, the following  
is submitted:

**HALCON USA, INC.**

desiring to organize or qualify under the laws of the State of Florida, with  
its principal place of business in the City of Miami, County of Miami-Dade,  
State of Florida, has named:

**Roberto F. Fleitas, Esquire**

as its agent to accept service of process within the State of Florida, with  
the registered address as:

782 N.W. Lejeune Road  
Suite 530  
Miami, Florida 33126

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TALLAHASSEE, FLORIDA

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**ACKNOWLEDGMENTS**

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

DATED: THIS 4TH DAY OF APRIL, 2001.

  
REGISTERED AGENT

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