

PA1000050382

Date
5/07/01

Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

400004215534--7
-05/14/01--01120--009
****122.50 *****78.75

Re; WISO CORP

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, certified copy of articles of Incorporation and Fee for Registered agent Designation for the above named corporation.

Very truly yours,

WISO CORP.

(name of corp)

18217 SW 4TH STREET

PEMBROKE PINES, FLORIDA 33029

Phone

954-437-4637

FILED
01 MAY 14 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5-21-01
10-18-01
WCO

ARTICLES OF INCORPORATION
OF

WISO CORP

(name of corp)

The undersigned subscriber(s) to these Articles of incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:
WISO CORP

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue ONE HUNDRED shares (100) of ONE Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares".

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

WISO CORP

NAME: _____

ADDRESS: 18217 SW 4TH STREET

CITY: PEMBROKE PINES

FLORIDA

ZIP 33029

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TALLAHASSEE, FLORIDA

The name and street address of the Initial Registered Agent of this Corporation is:

NAME: IGNACIO GORBEA

ADDRESS: 18217 SW 4TH STREET

CITY: PEMBROKE PINES FLORIDA ZIP 33029

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-laws, but shall never be less than one (1). the names and addresses of the initial director(s) of the corporation are as follows:

NAME: IGNACIO GORBEA

ADDRESS 18217 SW 4TH STREET

CITY PEMBROKE PINES FLORIDA ZIP 33029

NAME:

ADDRESS

CITY FLORIDA ZIP

NAME: _____

ADDRESS: _____

CITY: _____ FLORIDA _____ ZIP _____

ARTICLE VII - INCORPORATORS

The names and address of the incorporators signing these Articles of Incorporation are as follows:

NAME: IGNACIO GORBEA PRES/TRES/SEC

ADDRESS: 18217 SW 4TH STREET

CITY: PEMBROKE PINES FLORIDA ZIP 33029

NAME:

ADDRESS:

CITY: FLORIDA ZIP

NAME: _____

ADDRESS: _____

CITY: _____ FLORIDA ZIP _____

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 7TH day of MAY, 2001.

Ignacio Gorbea

STATE OF FLORIDA

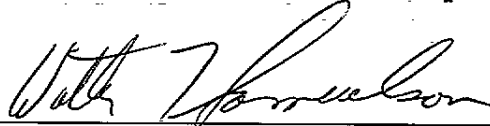
COUNTY OF BROWARD)

before me , a Notary Public authorized to take
acknowledgements in the State and County set forth above,
personally appeared

IGNACIO GORBEA

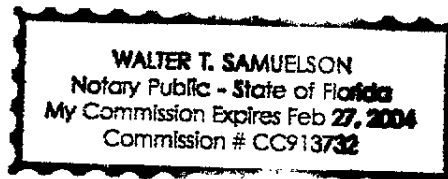
known to me and known to be the person(s) who executed the
foregoing Articles of Incorporation, and who acknowledged
before me that HE executed these Articles of
Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and
seal, in the State and County aforesaid, this 7TH day
of MAY, 2001.



Notary Public, State of Florida

My commission expires:



CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

WISO CORP

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at

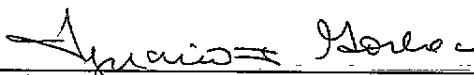
18217 SW 4TH STREET PEMBROKE PINES, FLORIDA
33029

has named IGNACIO GORBEA

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.



registered agent

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01 MAY 14 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA