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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0381

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.

CARIBE FIVE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

McKnight JUL 16 2001 ✓

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:

CARIBE FIVE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**1570 MADRUGA AVE. PH 1A
CORAL GABLES, FL 33146**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**ANY + ALL BUSINESS NOT PROHIBITED BY THE LAWS OF THE U.S.
+ STATE OF FLORIDA**

ARTICLE IV SHARES

The number of shares of stock is:

**AUTHORIZED 1000 PAR VALUE \$1
ISSUED 100**

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

**ALEXIS M. AGREDA
1570 MADRUGA AVENUE, PH 1A
CORAL GABLES, FL 33146**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**ALEXIS M. AGREDA
1570 MADRUGA AVENUE, PH 1A
CORAL GABLES, FL 33146**

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

Date

Date

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