

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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Cilena's month, Inc.

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| Art of Inc. File |
| LTD Partnership File |
| Foreign Corp. File |
| L.C. File |
| Fictitious Name File |
| Trade/Service Mark |
| Merger File |
| Art. of Amend. File |
| RA Resignation Smi |
| Dissolution / Withdrawal |
| Annual Report / Reinstatement |
| Cert. Copy |
| Photo Copy |
| Certificate of Good Standing |
| Certificate of Status |
| Certificate of Fictitious Name |
| Corp Record Search |
| Officer Search |
| Fictitious Search |
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| Vehicle Search U |
| Officer Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record |
| UCC 1 or 3 File |
| UCC 11 Search |
| UCC 11 Retrieval |
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 18, 2001

CAPITAL CONNECTION, INC. 417 E. VIRGINIA ST., STE. 1 TALLAHASSEE, FL 32301

SUBJECT: ALENA'S INC. Ref. Number: W01000021617 OT SEP 20 PH 1: 28

OF PARTMENT OF STATE
OWNSION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for ALENA'S INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6929.

Joey Bryan Document Specialist New Filing Section

Letter Number: 101A00052208

RE-SUBMIT
PLEASE OBTAIN THE ORIGINAL
FILE DATE

ARTICLES OF INCORPORATION

OF

Alena's Escorts, Inc.

OI SEP 18 AM 10: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is Alena's Escorts, Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business is 422 Fleming St., Office 15, Key West, FL 33040 and mailing address of the corporation is P.O. Box 2069, Key West, FL 33045-2069.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Albert L. Kelley, 926 Truman Ave., Key West, FL 33040.

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of the initial Board of Directors of the corporation is President/ Secretary/ Treasurer: Charlotte Gray, 25235 East Shore Dr., Summerland Key, FL 33042.

The undersigned has executed these Articles of Incorporation this 18th day of September 2001.

"Capital Connection, Inc. by Stacey Legget, Client Representative"

Stacey Regett

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

| 1. | The name of the corporation is:_ | Alena's Escorts, Inc. |
|-----------|-----------------------------------------------------|--------------------------------|
| | | |
| 2. is: | The name and street address of the Albert L. Keller | he registered agent and office |
| | 926 Truman Ave. New West FL 33040 | |
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HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

OI SEP 18 AM 10: 15
SECRETARY OF STATE
TALLAHASSEF FINALE