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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

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FLORIDA PROFIT CORPORATION OR P.A.

DETTALLES GROUP, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
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SEP 24 2001

ARTICLES OF INCORPORATION

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

ARTICLE I

The initial name and address of this corporation shall be:

**DETALLES GROUP, INC.
14401 SW 88 ST
SUITE N309
MIAMI, FL 33186**

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ARTICLE II

This corporation may engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE III

The capital stock authorized, the par value thereof, and the characteristics of such stock shall be as follows:

<u>Number of Shares Authorized</u>	<u>Par Value Per Share</u>	<u>Class of Stock</u>
500	\$1.00	Common

ARTICLE IV

The name and address of the initial registered agent is:


**FLOR ALBA PENALVER
14401 SW 88 ST
SUITE N309
MIAMI, FL 33186**

ARTICLE V

The name and street address of the incorporator to this Articles of Incorporation is:

Flor Alba Penalver – Director 14401 SW 88 ST
Suite N309
Miami, FL 33186

The undersigned incorporator have executed these Articles of Incorporation

this 24 day of September, 2001.

Signature



CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned 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:

DETALLES GROUP, INC.

2. The name and address of the registered agent and office is:

FLOR ALBA PENALVER
14401 SW 88 ST, #N309
MIAMI, FL 33186

Signature _____



Title _____

Director

Date _____

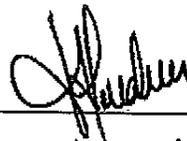
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HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

Signature _____



Date _____

9/24/01