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Florida Department of State
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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.

LAVANSAN FLORIMEX, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

N. Gulligan DEC 7 2001

12/7/01 11:22 AM

ARTICLES OF INCORPORATION

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

ARTICLE I - NAME

The name of the corporation shall be:

LAVANSAN FLORIMEX, INC.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

14211 SW 36 Street
MIAMI, FL 33175

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ARTICLE III -SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the Initial registered agent is:

ORSON PINO
14211 SW 36 Street
Miami, FL 33175

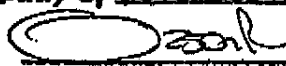
ARTICLE V - INCORPORATOR

The name and street address of the Incorporator to these Articles of Incorporation is:

ORSON PINO 14211 SW 36 Street, Miami, FL 33175

JORGE RODRIGUEZ 3659 BAYVEIW ROAD, COCONUT GROVE, FL 33133

The undersigned Incorporator has executed these Articles of Incorporation this 30th day of November 20 01


Signature

ARTICLE VI- DIRECTOR(S)

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

ORSON PINO 14211 SW 36 Street, Miami, FL 33175

JORGE RODRIGUEZ 3659 BAYVEIW ROAD COCONUT GROVE, FL 33133

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


Registered Agent Signature