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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 205-0381

From: Account Name : ACE INDUSTRIES, INC.  
Account Number : 070744001530  
Phone : (305) 358-2571  
Fax Number : (305) 358-7832

**FLORIDA PROFIT CORPORATION OR P.A.**

**IBS CARIBE, INC.**

Certificate of Status	0
Certified Copy	1
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**H02-40572**

## **Articles of Incorporation**

Article 1: Name of Corporation: **IBS CARIBE, INC.**

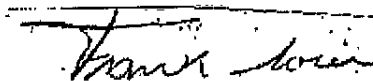
Address of Corporation: **1520 NW 128<sup>TH</sup> DR., STE. 208  
SUNRISE, FLORIDA 33323**

Article 2: Capital Stock: The number of shares which the corporation has authorized to be outstanding at any one time is **2,000**, with a par value of **\$5.00**.

Article 3: REGISTERED AGENT: **FRANK COVA**

REGISTERED OFFICE: **1520 NW 128<sup>TH</sup> DR., STE. 208  
SUNRISE, FLORIDA 33323**

\*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.



Signature of Registered Agent

Article 4: The Board of Directors are: (Board of Directors is NOT REQUIRED).  
First listed is President, Second is Vice President, then Secretary/Treasurer.

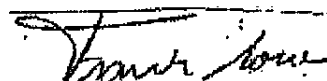
1. **FRANK COVA, 1520 NW 128<sup>TH</sup> DR., STE. 208, SUNRISE, FLORIDA 33323**

2.  
3.

Article 5: The NAME and ADDRESS of the INCORPORATOR is:

**FRANK COVA  
1520 NW 128<sup>TH</sup> DR., STE. 208  
SUNRISE, FLORIDA 33323**

In witness whereof, I have subscribed my name:



Signature of Incorporator

**H02-40572**

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**TALLAHASSEE, FLORIDA**