Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0381

From:

: FAS-T CORP. AGENTS, INC. Account Name

Account Number : 071001002335 : (305)599-0839 Phone Fax Number : (305)716-0346⁻

FLORIDA PROFIT CORPORATION OR P.A

CYCLOPE ENTERTAINMENT CORP.

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ARTICLES OF INCORPORATION

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CYCLOPSE ENTERTAINMENT CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: CYCLOPSE EXTERNALMENT CORP.

The principal place of business of this corporation shall 620 Madeira Ave - Coral Gables, Fl. 33134.

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 100 shares @ \$1.00 par value.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Silvia Couso-Celis 620 Madeira Ave Coral Gables, Fl 33134.

(Director)

Ricardo Celis 620 Madeira Ave Coral Gables, Fl 33134.

(Secretary)

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator (s) to this articles of incorporation is(are):

Ricardo Celis 620 Madeira Ave Coral Gables, Fl 33134,

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 4th day of March 2002.

Signature(s) of Incorporator(s)

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 th	ne corporation:	
CYCLOPSE ENTERTAINMENT CORP.		
2. The name and office is:	address of the registered age	nt and
Ricardo Celis	620 Madeira Ave	021 TALL
	(P.O. BOX NOT ACCEPTABLE)	10000000000000000000000000000000000000
	Coral Gables, Fl 33134.	SSE OF
	(CITY/STATE/ZIP) SIGNATURE	F. F. STATE
	4	
	TITLE-	
	DATE3_4_02	
VOOKE STATED COK	ED TO ACCEPT SERVICE OF PROCI PORATION, AT THE PLACE DESIGNA BY AGREE TO ACT IN THIS CAPA	ATED IN THIC

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