TRANSMITTAL LETTER

Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

800008097588—-3 -09/30/02--01034--019 *****78.75 *****78.75

Filing Fee,

Certified Copy & Certificate

"ARAMA, INC." SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for **\$70.00** \$78.75 **\$122.50** \$131.25 Filing Fee Filing Fee Filing Fee

& Certificate

ADDITIONAL COPY REQUIRED

& Certified Copy

PEDRO MALDONADO FROM: Name (Printed or typed) 8650 S.W. 133RD. AVE.RD. #220 Address MIAMI, FL. 33183 City, State & Zip (305) 382-6975

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

.ARTICLES OF INCORPORATION

FILED

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:

"ARAMA, INC."

ARTICLE II PRINCIPAL OFFICE

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

8650 s.w. 133 rd.AVE. RD. APT. #220 MIAMI, FL. 33183

ARTICLE III SHARES

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

100 SHARES, HAVING A PAR VALUE OR (1.00) PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

PEDRO MALDONADO 8650 S.W. 133rd. AVE.RD. #220 MIAMI, FL. 33183

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

PEDRO MALDONADO 8650s.w. 133rd.AVE. RD. #220 MIAMI, FL. 33183

PRESIDENT - SECRETARIO

GUSTAVO ARANGO 15821 S.W. 104TERR. #206 MIAMI, FL. 33196

VICE-PRESIDENT

The undersigned incorporator(s) has(have) executed these Articles of Incorporation	this
	20
(An additional article must be added iff an effective date is requested.)	
Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

2. The name and address of the registered agent and office is:	
PEDRO MALDONADO	
8650 S.W. 133rd AVE. RD.#220	
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	
MIAMI, FLORIDA 33183	
(City/State/Zip)	
Having been named as registered agent and to accept service of process for the above stated corporate the place designated in this certificate, I hereby accept the appointment as registered agent and to act in this capacity. I further agree to comply with the provisions of all statutes relating to the particular performance of my duties, and I am familiar with and accept the obligations of my possible registered agent.	agree
(SIGNATURE) 9-24-02	