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

From:  
Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305)634-3694  
Fax Number : (305)633-9696

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

**FLOR ARTE LATINAMERICA, CORP.**

Certificate of Status	0
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(2)

**ARTICLES OF INCORPORATION**

*In Compliance With Chapter 607 and/or Chapter 621, F.S. (profit)*

**ARTICLE I NAME**

*The name of the corporation Shall be:*  
FLOR ARTE LATINAMERICA,CORP.

**ARTICLE II PRINCIPAL OFFICE**

*The Principal Place of Business and Mailing address of this Corporation Shall be:*  
2500 CORAL SPRING DR # 108, CORAL SPRING, FLORIDA -33065

**ARTICLE III PURPOSE**

*The Purpose for Wich the Corporation is Organized is:*  
ALL BUSINESS UNDER THE LAW OF STATE THE FLORIDA

**ARTICLE IV SHARES**

*The Number Of Shares of Stock Is:*  
500 SHARES NO PAR VALUE

**ARTICLE V INITIAL DIRECTORS/OFFICERS**

*the name(s), address (es) and Title(s):*

REMO BRUNO MONTOYA      PRESIDENT      2500 CORAL SPRING Dr # 108  
CORAL SPRING FL-33065

**ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS**

*The name and Florida street Address of Registered agent is:*

ENRIQUE GUEVARA      630 S STATE ROAD 7  
MARGATE FLORIDA 33068  
PHONE: 954-978-6249

**ARTICLE VII INITIAL INCORPORATOR**

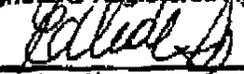
*The Name and address of the Incorporator Is:*

ENRIQUE GUEVARA      630 S STATE ROAD 7  
MARGATE FLORIDA 33068

\*\*\*\*\*  
HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS  
FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS  
CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED  
AGENT AND AGREE TO ACT IN THIS CAPACITY

  
\_\_\_\_\_  
Signature/ Registered Agent

04/15/03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/ Incorporator

04/15/03  
\_\_\_\_\_  
Date

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