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To:

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

From:

Account Name : YOUR CAPITAL CONNECTION, INC.  
Account Number : 120000000257  
Phone : (850) 224-8870  
Fax Number : (850) 224-7047

FLORIDA PROFIT CORPORATION OR P.A.

INVERSIONES MS, INC.

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CAPITAL CONNECTION

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
**OF**  
**INVERSIONES MS, INC.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I: NAME**

The name of the corporation is **INVERSIONES MS, INC.**

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and mailing address of the corporation is **6419 N.W. 109 Avenue, Miami, FL 33178.**

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of (\$1.00) per share.

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**ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is Juan Carlos Bermudez, Esq., 8300 N.W. 53 St., Suite 300, Miami, FL 33166.

**ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

**ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The name and address of each member of the initial Board of Directors of the corporation is President: Luciana De Serrapiglio, 6419 N.W. 109 Ave., Miami, FL 33178, Vice-President: Victor Impera, 8400 N.W. 58 St., Miami, FL 33166.

The undersigned has executed these Articles of Incorporation this 1st day of May 2003.

"Capital Connection, Inc. by Stacey Leggett, Client Representative"

Stacey Leggett

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CAPITAL CONNECTION

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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 the corporation is: Inversiones HS, Inc.

2. The name and street address of the registered agent and office is: Juan Carlos Bermudez, Esq.  
3300 NW. 53 St., Suite 300  
Miami, FL 33146.

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



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