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

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
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FLORIDA PROFTT CORPORATION OR P.A.

CAMILO'S TRANSFER INC.

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**ARTICLES OF INCORPORATION**

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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;

**CAMILO'S TRANSFER INC.**

The principal place of business of this Corporation shall be:

**8 S.E. 2<sup>ND</sup> AVENUE #604  
MIAMI, FL. 33131**

**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: FIVE HUNDRED (500) SHARES OF ONE DOLLAR (\$1.00) PER VALUE COMMON STOCK, WHICH SHALL BE DESIGNATED "COMMON SHARES".

**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):

**GUILLERMO A. ALVAREZ-President/Treasurer  
8 S.E. 2<sup>ND</sup> AVENUE # 604  
MIAMI, FL. 33131**

**MARTHA ELENA PAREDES-Vice-President  
8 S.E. 2<sup>ND</sup> AVENUE #604  
MIAMI, FL. 33131**

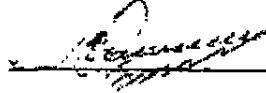
**ARTICLE VI INCORPORATOR (S)**

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

**GUILLERMO A. ALVAREZ- President  
8 S.E. 2<sup>ND</sup> AVENUE # 604  
MIAMI, FL. 33131**

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 19 day of September 2003.

**SIGNATURE(S) OF INCORPORATOR(S)**

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

CLERK OF STATE  
TALLAHASSEE FLORIDA

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 the corporation:

**CAMILO'S TRANSFER INC.**

2. The name and address of the registered agent and office is:

**GUILLERMO A. ALVAREZ-President**

**8 S.E. 2<sup>ND</sup> AVENUE # 604**

**MIAMI, FL. 33131**

**SIGNATURE**

**TITLE President**

**DATE 09-19-03**

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**

**09-19-03**