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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.
Account Number : 104512000707
Phone : (305) 266-4080
Fax Number : (305) 221-2388

EFFECTIVE DATE
01-01-04

FLORIDA PROFIT CORPORATION OR P.A.**CAUCEDO MARINE, INC.**

Certificate of Status	0
Certified Copy	0
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12/26/2003

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ARTICLES OF INCORPORATION

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

ARTICLE I

NAME

The name of the corporation shall be CAUCEDO MARINE, INC.

ARTICLE II

PRINCIPAL OFFICE

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

600 N.W. 7 AVE. #3
MIAMI, FL. 33136

ARTICLE III

SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated [COMMON SHARES.]

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FRANCISCO A. PEREZ
600 N.W. 7 AVE. #3
MIAMI, FL. 33136

Prepared by: FRANCISCO A. PEREZ
600 N.W. 7 AVE. #3
MIAMI, FL. 33136
305 325-8999

Electronically Sent By: BUSINESS WORLD TRANSACTIONS, INC.
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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, 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.

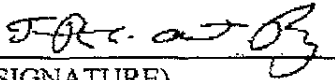
1. The name of the corporation is: CAUCEDO MARINE, INC.

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

FRANCISCO A. PEREZ
600 N.W. 7 AVE. #3
MIAMI, FL. 33136

*Having 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.*


(SIGNATURE)

(DATE) 12-26-03

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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