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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 : ALBA ACCOUNTING SERVICE, INC.  
Account Number : I20040000143  
Phone : (305)824-5444  
Fax Number : (305)828-5200

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

**MAITE RODRIGUEZ, INC.**

Certificate of Status	0
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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04 SEP -3 AM 9:09

**ARTICLE OF CORPORATION**

**OF**

**MAITE RODRIGUEZ, INC.**

**ARTICLE I**

**NAME**

The name of this Corporation shall be:

**MAITE RODRIGUEZ, INC.**

**ARTICLE II**

**PURPOSE**

This corporation is organized for the purpose of operating as  
Real Estate and Mortgage Advisor.

**ARTICLE III**

**CAPITOL STOCK**

This corporation is authorized to issue 1,000 shares of \$1.00 per value  
common stock.

**ARTICLE IV**

**INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT**

The street address of the initial principal office and registered office of this  
corporation is 6405 COWPEN RD, STE Q103. MIAMI LAKES, FL 33014 and  
the name of the initial registered agent of this corporation at the above  
address is:

**MAITE RODRIGUEZ**

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**ARTICLE V**

**DIRECTORS**

This corporation shall have (1) one President. The number of Directors may be either increased or diminished from time to time by-laws but shall never be less than one. The name and address of the initial Director(s) of this corporation is:

**MAITE RODRIGUEZ - PRESIDENT**  
6405 COWPEN RD, SUITE Q103  
MIAMI LAKES, FL 33014

**ALFREDO MORAN - VICE-PRESIDENT**  
9181 SW 140 STREET  
MIAMI, FL 33176

**ARTICLE VI**

The name and address of the person(s) signing these Articles is:

**MAITE RODRIGUEZ - PRESIDENT**  
6405 COWPEN RD, SUITE Q103  
MIAMI LAKES, FL 33014

**ARTICLE VII**

**POWERS**

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

**ARTICLE VIII**

**INDEMNIFICATION**

The corporation shall indemnify any officers, directors, or former officers, and former directors fully permitted by law.

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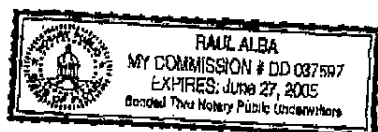
**ARTICLE IX****AMENDMENT**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation. IN WITNESS WHERE OF the undersigned subscribers have executed these Articles of Incorporation on this August 30<sup>th</sup>, 2004

**MAITE RODRIGUEZ, PRESIDENT****COUNTY OF MIAMI-DADE  
STATE OF FLORIDA**

BEFORE ME, the undersigned authority, this day personally appeared MAITE RODRIGUEZ after being duly sworn, depose and say that the facts contained above are true and correct, and that she has executed the same for the purposes contained herein.

WITNESS my hand and official seal this August 30<sup>th</sup>, 2004

**RAUL ALBA  
NOTARY PUBLIC, STATE OF FLORIDA  
COUNTY OF MIAMI-DADE**

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CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHICH PROCESS MAY BE SERVED IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES.  
THE FOLLOWING IS SUBMITTED:

**MAITE RODRIGUEZ, INC.**

DESIRING TO ORGANIZE OR QUALIFY THE LAWS OF THE STATE OF FLORIDA, WITH IT'S PRINCIPAL PLACE OF BUSINESS AT 6405 NW COWPEN RD, STE Q103, MIAMI, FL 33014 COUNTY MIAMI-DADE, STATE OF FLORIDA AS IT'S AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

Maite Rodriguez.  
CORPORATE OFFICER

President.  
TITLE

08/30/04.  
DATE

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSABILITIES AS REGISTERED AGENT OF SAID CORPORATION, AND I HEREBY WITH THE PROVISIONS OF ALL STATUTES TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

DATE

[Signature]  
08/30/04

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