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SECKLIARY OF STATE TALLAHASSEF, FLORIDA

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To:

Division of Corporations

Fax Number : (850)205-0381

E, Low:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 : (305)716-0346 Fax Number

# FLORIDA PROFIT CORPORATION OR P.A.

### JC. CREATIO INC.

Certificate of Status	0
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	ARTIC	LES OF INCORPORATION	· · · · · · · · · · · · · · · · · · ·
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		, CREATION INC. (name of corporation)	14 SEP 21 AM 8: 25
The understand	d acting as the incommittees a	Commission under the Worlds St.	THE SEP 21 AM 8: 25
following articles	of incorporation for such con	fs corporation under the Florida in peration:	TALLAHASSEE FLORIDA
		TCLE! - CORPORATE NAME	
The name of the	corporation is:		
والمروس المائل الإنساء والناف	JC	. CREATION INC.	
		ARTICLE II - DURATION	
This corporation		dissolved according to Florida law	ı <b>.</b>
		ARTICLE III - PURPOSE of engaging in any activities or busi	
nited States and the	State of Florida.	·	-
		TICLE IV - CAPITAL STOCK	•
The corporation	n is authorized to issue 100	shares of constition stock, per	per thare
	ess of the initial principal offic	EV - INITIAL PRINCIPAL OFFICE w and, if different, the mailing addr	
STREET ADDRESS			
	1053# N. W. 27 Ave	nue	
CTTY	MIAMI	ACIRO.FI	239 33147
Mailing addre	ss. if different		
STREET ADDRESS			
CITY		FLORIDA	<b>7</b> .P
The street add		FIAL REGISTERED OFFICE AN office and the name of the initia	
NAME			The state of the office i
ADDRESS _	JOSE H. CISTED 10535 N. W. 2		
CILA	IMAIN	FLORIDA	ZIP 33147

# H04000189123 3

	• • • • • • • • • • • • • • • • • • • •	INITIAL BOARD OF		
ishee increase	outation shall have	the By-Laws, but shall no	ors initially. The pur ver be less than one	mber of directors may be (i). The names and
NAME	JOSE H. CISTERNA, PRES	IDENT 80%		
ADDRESS	991 NE 159 St			
CITY	n. Miami Brach	STATE.	Poride	ZIP 331 62
NAME	PABLO CISTERNA, VICE-P	RESIDENT 204		
ADDRESS	991 NE 159 St			
CITY	N. MIAMI BEACH	STATE	Florida	ZIP 33162
NAME				
ADDRESS		- · · · · · · · · · · · · · · · · · · ·		
CITY		STATE	<del>,</del>	ZIP
he names an	d addresses of the incorporators signi-	——————————————————————————————————————	-	w <u>\$</u> ;
NAME	JOSE H. CISTERNA, PRES	——————————————————————————————————————		
ADDRESS	991 NE 159 St			
CITY	N. MIAMI BEACH	STATE		ZIP 33162
NAME	PABLO CISTERNA, VICE-PR	ESIDENT 20%		
ADDRESS	991 NE 159 St			——————————————————————————————————————
CITY	N. MIAMI BEACH	STATE	Florida	ZIP 33162
NAME			<del></del>	
ADDRESS				
CITY	-	STATE	······································	ZIP
The undersit	med incorporator(s) have executed	these Articles of Incom	weation this tv	ventieth
	September	2004		
		Iletino	4	(Signature)
				(Signature)
			· · · · · · · · · · · · · · · · · · ·	(Signature)

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

	•
	JC. CREATION INC.
	(name of corporation)
Pursuant to Florida Statutes Secti	ions 48.091 and 607.0501, the following is submitted:
The above corporation, organizates indicated in the Articles of Inc. at 10535 N. W. 27 Av	•
has named JOSE H. CIS	
corporation at the place designate	agent and to accept service of process for the above stated to in this certificate, I hereby accept the appointment as regis-
corporation at the place designate terest agent and agree to act in the	ed in this certificate, I hereby accept the appointment as regis- a capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with
corporation at the place designant tered agent and agree to act in the statutes relating to the proper and	ed in this certificate, I hereby accept the appointment as regis- a capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with

PACE 3