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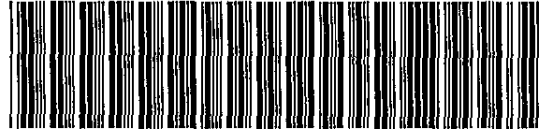
(Business Entity Name)

(Document Number)

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4/13/05  
[Handwritten signature and initials]



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

April 11, 2005

CSC

SUBJECT: A MUNDIAL, INC.  
Ref. Number: W05000018189

We have received your document for A MUNDIAL, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is P00000079221.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes  
Document Specialist  
New Filings Section

Letter Number: 005A00024555



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 303807 81106A

AUTHORIZATION :

*Patricia Pigato*

COST LIMIT : \$ 78.75

ORDER DATE : April 8, 2005

ORDER TIME : 10:09 AM

ORDER NO. : 303807-005

CUSTOMER NO: 81106A

CUSTOMER: David E. Goldman, Esq  
David E. Goldman, Esq

20700 West Dixie Highway

N. Miami Beach, FL 33180

DOMESTIC FILING

NAME: A MUNDIAL, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP  
       ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: \_\_\_\_\_



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

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AUTHORIZATION :

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EXAMINER'S INITIALS: \_\_\_\_\_

FILED  
05 APR 12 PM 1:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
At Mundial, Inc.**

We, the undersigned, hereby associate ourselves for the purpose of becoming a corporation under the laws of the State of Florida, by and under the provisions of the Statutes of the State of Florida.

**ARTICLE I  
CORPORATE NAME**

The name of the corporation shall be At Mundial, Inc.

**ARTICLE II  
GENERAL NATURE OF BUSINESS**

The general nature of the business and the objects and purposes proposed to be transacted and carried on, are to do any and all activities or businesses permitted under the laws of the United States and of this State, as fully and to the same extent as natural persons might or could do.

**ARTICLE III  
EXISTENCE OF CORPORATION**

The existence of this corporation shall be perpetual unless sooner dissolved according to law.

**ARTICLE IV  
PRINCIPAL PLACE OF BUSINESS**

The principal place of business of the corporation shall be located at 177 Lakeview Drive, Suite 101, Weston, Florida, 33326.

**ARTICLE V**  
**CAPITAL STOCK**

The maximum number of shares which the corporation is authorized to have outstanding at any time shall be ONE HUNDRED (100) common shares at a value of FIVE DOLLAR AND 00/100 (\$5.00) per share.

**ARTICLE VI**  
**AMOUNT OF CAPITAL TO BEGIN BUSINESS WITH**

The amount of capital with which this corporation shall commence business shall be no less than One Hundred (\$100.00) Dollars.

**ARTICLE VII**  
**NUMBER OF DIRECTORS**

The number of directors of this corporation shall be no less than one (1).

**ARTICLE VIII**  
**BOARD OF DIRECTORS**

The name and post office addresses of the Board of Director and Officer of this corporation is:

Luis Duran	
177 Lakeview Drive Suite 101	President/Director
Weston, Florida 33326	

**ARTICLE IX**  
**SUBSCRIBERS**

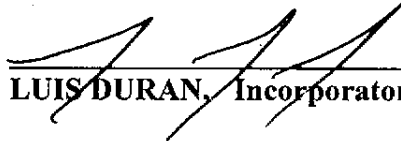
The name and post office address of the subscriber and his interest is as follows:

Luis Duran	
177 Lakeview Drive, Suite 101	100 shares
Weston, Florida 33326	

**ARTICLE X**  
**INCORPORATOR(S)**

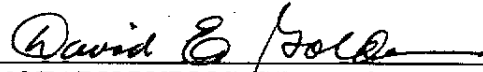
The incorporator of the within named corporation is LUIS DURAN.

The undersigned have executed these Articles of Incorporation this 07 day of April, 2005.

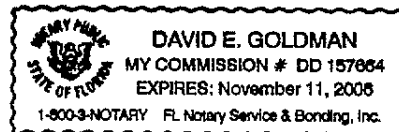
  
\_\_\_\_\_  
LUIS DURAN, Incorporator

**STATE OF FLORIDA**  
**COUNTY OF DADE**

The foregoing instrument was acknowledged before me this 07 day of April, 2005 LUIS DURAN, who is personally known to me, or who has produced driver's license as identification and who did (did not) take an oath.

  
\_\_\_\_\_  
NOTARY PUBLIC, STATE OF FLORIDA  
Print Name: \_\_\_\_\_

My Commission Expires:



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

Pursuant to the provisions of Section 607.0501, 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: At Mundial, Inc.

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

DAVID E. GOLDMAN  
20700 West Dixie Highway, Suite 100  
North Miami Beach, Florida 33180

  
LUIS DURAN

Dated this 07 day of April, 2005.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED ABOVE, 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.

  
DAVID E. GOLDMAN

Dated this 07 day of April, 2005.

STATE OF FLORIDA  
COUNTY OF DADE

The foregoing instrument was acknowledged before me this 7 day of April, 2005 by DAVID E. GOLDMAN, who is personally known to me or who has produced \_\_\_\_\_ as identification and who did (did not) take an oath.

My Commission Expires:

  
NOTARY PUBLIC, STATE OF FLORIDA

Print Name: Xiomara Rojas Urena



Xiomara Rojas-Urena  
My Commission DD239251  
Expires August 06, 2007