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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 : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

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FLORIDA PROFIT CORPORATION OR P.A.

EXPORTEK OF MIAMI, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

EXPORTER OF MIAMI, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

12260 NW 8 Street
Miami, FL 33182

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any or all lawful activities or business permitted under the laws of
the United States, the State of Florida, or any other state.

ARTICLE IV SHARES

The number of shares of stock is:

500 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Franklin Omar Guerrero - President
12260 NW 8 Street, Miami, FL 33182

Yordanka Oro - VicePresident
12260 NW 8 Street, Miami, FL 33182

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

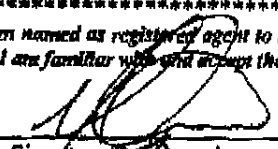
Yordanka Oro
12260 NW 8 Street, Miami, FL 33182

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Yordanka Oro
12260 NW 8 Street, Miami, FL 33182

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

S-23-05

Date



Signature/Incorporator

S-23-05

Date

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