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To:

Division of Corporations

Fax Number : (850) 205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.

Account Number : 120000000257 Phone : (850)224-8870

Fax Number : (850) 224-7047

FLORIDA PROFIT CORPORATION OR P.A.

MANADA CORPORATION

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ARTICLES OF INCORPORATION

SECHETARY OF STATE TALLAHASSEL FLORIDA

OF

MANADA CORPORATION

ARTICLE I.

CORPORATE NAME

The name of this Corporation shall be:

MANADA CORPORATION

The permanent and mailing address of the corporation shall be:

452 West 41 Place Hialeah, Fl. 33012

ARTICLE II.

NATURE OF CORPORATE BUSINESS

The Corporation may engage in any activity or business permitted under the laws of the United States and under the laws of the State of Florida.

ARTICLE III.

CAPITAL STOCK

This Corporation is authorized to issue a maximum of One Hundred (100) Shares of Stock. The Shares of Stock authorized shall be common stock having a par value of one (\$1.00) DOLLAR per share. The consideration to be paid for each share of stock shall be fixed by the Board of Directors.

ARTICLE IV.

INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Corporation's initial Registered Agent and Registered Office in the State of Florida shall be:

Enrique Zamora, Esq 3006 Aviation Avenue, Ph 4-C Coconut Grove, Florida 33133

ZAMORA & HILLMAN

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CAPITAL CONNECTION

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ARTICLE V.

BOARD OF DIRECTORS

The number of Directors may be altered from time to time by by-laws adopted by the Stockholders. However, the Corporation shall have no less than one (1) Director at any time.

ARTICLE VI.

INITIAL BOARD OF DIRECTORS

The name and post office address of the initial member(s) of the initial Board of Directors is/arc:

Address

Name

Rafael Amador-President 452 W. 41 Place

Hialcah, FL 33012

Maria C. Amador-Secretary 452 W. 41 Place

Hialeah, Fl. 33012

The members of the first Board of Directors shall hold office until the first annual meeting of Stockholders of the Corporation.

ARTICLE VII.

INCORPORATOR

The name and post office address of the Incorporator(s) executing these Articles of Incorporation is/are as follows:

NAME **ADDRESS**

Rafael Amador 452 W. 41 Place

Hialeah, Fl. 33012

ZAMORA & HILLMAN

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CAPITAL CONNECTION

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The undersigned Incorporator(s), for the purpose of forming a Corporation to do business within the State of Florida, does make and file these Articles of Incorporation, hereby declaring and certifying that the facts stated are true.

RAFAEL AMADOR

STATE OF FLORIDA] COUNTY OF DADE] SS.:

The foregoing instrument was acknowledged by me this 22 day of July, 2005, by Rafael Amador, who is personally known to me or who has produced a 2/////5_LICe/18 as identification and who did take an oath

My Commission Expires:

The undersigned hereby accepts the foregoing designation as initial Registered Agent and agrees to comply with the provisions of law applicable to said designation.

ENRIQUE ZAMORA, ESQ.

NOTARY PUBLIC

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