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Division of Corporations

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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 : XIOMARA LEE, P.A.  
Account Number : I20040000008  
Phone : (305) 262-2323  
Fax Number : (305) 262-2324

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 DEC -5 PM 2:37

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

**MONTES INVESTMENTS GROUP, INC.**

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

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**ARTICLES OF INCORPORATION**

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

05 DEC -5 PM 2:37

**ARTICLE I NAME**

The name of the corporation shall be:

MONTES INVESTMENTS GROUP, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

P.O. BOX 450294  
MIAMI, FL 33245**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

JAVIER F. MONTES - PRESIDENT/ DIRECTOR  
P.O. BOX 450294  
MIAMI, FL 33245ISABEL MONTES- VICE-PRESIDENT  
P.O. BOX 450294  
MIAMI, FL 33245**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:JAVIER F. MONTES  
2380 SW 80 CT  
MIAMI, FL 33155**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:JAVIER F. MONTES  
2380 SW 80 CT  
MIAMI, FL 33155

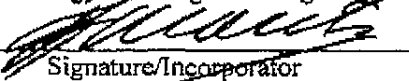
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

12/02/05

Date

  
\_\_\_\_\_  
Signature/Incorporator

12/02/05

Date

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