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Division of Corporations

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

Account Number: 071001002335 Phone : (305)599-0839

: (305)716-0346 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

IMPERIAL INSURANCE AGENCY USA, INC.

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ARTICLES OF INCORPORATION OF IMPERIAL INSURANCE AGENCY USA, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

IMPERIAL INSURANCE AGENCY USA, INC.

The principal place of business and mailing address of this corporation shall be:

1195 Foxforrest Circ Apopka, Fl 32712

ARTICLE II NATURE OF BUSINESS

This corporation may engage in insurance services or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000 SHARES \$ 1.00 PER VALUE

ARTICLE IV TERMS OF EXISTENCE

This corporation is to exist perpetually.

Propared by:

Hispan American Services Inc. 1885 W. Plagler St., Snite # 11 Miami, FL 33135

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address (es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected,

Martineito Martinez President 2929 Blooming Alamanda Loop Kissimmee, Fl 34747 Venecia Jimenez Treasurer and Secretary 2929 Blooming Alamanda Loop Kissimmee, Fl 34747

ARTICLE VI INCORPORATOR(S)

The name(s) and address (es) of the incorporator(s) to these articles of incorporation is(are):

Martincito Martinez 390 Shares 2929 Blooming Alamanda Loop Kissimmee, Fl 34747 Venecia Jimenez 100 Shares 2929 Blooming Alamanda Loop Kissimmee, Fl 34747

La Imperial de Seguros, S.A. 510 Shares Av. 27 de Febrero No. 28 Aptdo. 21206 Santo Domingo, Dominican Republic

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this 22ND day of December 2005

Signature(s) of Incorporator(s)

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

1. The name of the corporation	
IMPERIAL INSURANCE AGENC	Y USA, INC.
2. The name and address of the reg	gistered agent and office is:
FELICIA GRULLON	
(P.O. BOX NOT ACCEP	TABLE)
1195 FOXFORREST CIRC, APOPKA, FL	32712
(ADDRESS OF	
	SIGNATURE Dalamond
•	TITLE President
	DATE 12/21/2005 FF 12/21/2005
ABOVE STATED CORPORATION THIS CERTIFICATE, I HEREBY AND I FURTHER AGREE TO CONSTATUTES RELATIVE TO	CEPT SERVICE OF PROCESS FOR THE ON, AT THE PLACE DESIGNATED IN AGREE TO ACT IN THIS CAPACITY, MAPLY WITH THE PROVISIONS OF ALL THE PROPER AND COMPLETE ES, AND I ACCEPT THE DUTIES AND