

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

FLORIDA PROFIT/NON PROFIT CORPORATION

al-s caribbean corporation

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March 4, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE CORPORATE KIT COMPANY

SUBJECT: AL-S CARIBBEAN CORPORATION

REF: W08000011306

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please correct the spelling of the citys name Article VI.

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P.O BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF INCORPORATION OF

AL-S CARIBBEAN CORPORATION

a Florida Corporation

ARTICLE I: NAME

The name of this corporation is:

AL-S CARIBBEAN CORPORATION

D8 MAR -4 AM 9: 39
SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II: DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

ARTICLE III: PURPOSE

The corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV: CAPITAL STOCK

This corporation is authorized to issue sixty (60) shares of NO PAR VALUE common stock, which shall be designated "Common Stock".

Prepared by: Jesus F. Bujan, Esquire
782 N.W. Lejeune Road, Suite 530
Miami, Florida 33126
(305) 442-1439
Florida Bar No. 401560

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ARTICLE V: PREEMPTIVE RIGHTS

Every shareholders, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rate share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI: INTIAL REGISTERED OFFICE AND AGENT

The street address of the principal office of this corporation is:

2602-2620 Palm Ave. *Hialeah, FLORIDA 33010*

The name of the initial registered agent of this corporation is:

Samuel Alonso

ARTICLE VII: INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director(s), initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than one (1). The name(s) and address(es) of the initial director(s) of this corporation is (are):

Samuel Alonso

2602-2620 Palm Ave. Hisleah, FLORIDA 33010

ARTICLE VIII: INDEMNIFICATION

The corporation shall indemnify any officer or director, or any formal officer or director, to the full extent permitted by law.

ARTICLE IX: INCORPORATORS

The name and address of the person(s) signing these articles of incorporation is (are):

Samuel Alonso 2602-2620 Palm Ave. Hielesh, FLORIDA 33010

(N	WITNESS	WHERE)P, t	he undersigne	d subsc	riber(s)	has (ha	ave)
executed	these	Articles	σf	incorporation	n this	3	day	of
	och	_, 2008.						
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ALONSO the foreg	known to oing Artic	me and ki les of Inci	nown	d authority, pe by me to be atlan, and ack urposes therei	the perso nowledg	on(s) who	o execu	rted
day of	Mach who has p	, 2008 b	y SA	as acknowledg MUEL ALONS	O who is	s person	ally koo	
٠	iblig. State	of Florida		<u>.</u>				
(My Copin	njesion Exp	MA COMMIS	SE SUM SION II UI June 30,	Plana II				

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE OF FLORIDA, NAMING AGENT UPON WHOM SERVICE OF PROCESS MAY BE EFFECTIVE

IN COMPLIANCE with Section 607.034 of the Florida Statutes, the following is submitted:

AL-S CARIBBEAN CORPORATION

desiring to organize or qualify under the laws of the State of Florida, with its principal place of business in the City of Miami, County of Miami-Dade, State of Florida, has named:

SAMUEL ALONSO

as its agent to accept service of process within the State of Florida, with the registered address as:

2602-2620 Palm Ave. Hislesh, FL 33010

ACKNOWLEDGMENTS

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE MENTIONED CORPORATION. AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

DATED: THIS 3 DAY OF 17.16 1008

REGISTERED AGENT

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