

Division of Corporations

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**Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : HUBCO
Account Number : 104662003400
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FLORIDA PROFIT/NON PROFIT CORPORATION

Abilingual Latin America Inc.

Certificate of Status	1
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Estimated Charge	\$78.75

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

10/13/2009 1:44:00 PM

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Ambilingual Latin America Inc.

ARTICLE II PRINCIPAL OFFICE

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

Ambilingual Latin America Inc.

**900 W. 49th Street, Suite 332
Hialeah, FL 33012**

ARTICLE III SHARES

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

100 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Vivian Topp Klein
840 S.W. 18th Street
Boca Raton, FL 33486**

**Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940**

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ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

Vivian H. Topp Klein - 840 S.W. 18th Street, Boca Raton, FL 33486 - President/Director
Maria Hargrove - 2900 Oslo Avenue, Cooper City, FL 33026 - Vice President/Director

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Vivian H. Topp Klein - 840 S.W. 18th Street, Boca Raton, FL 33486
Maria Hargrove - 2900 Oslo Avenue, Cooper City, FL 33026

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

9th day of October 2009

Vivian H. Topp Klein
Vivian H. Topp Klein - Signature

Maria H. Hargrove
Maria Hargrove - Signature

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE
REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Ambilingual Latin America Inc.**

2. The name and address of the registered agent and office is:

Vivian Topp Klein

Name

840 S.W. 18th Street

(P.O. Box or Mail Drop Box NOT Acceptable)

Boca Raton, FL 33486

(City / State / Zip)

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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Vivian Topp Klein
Vivian Topp Klein
SIGNATURE

October 9, 2009
(Date)

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