Charter Number Only DATION Requestor's Name

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MPIRE Toll Free: 1-800-432-3028

CORPORATION(S) NAME

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6.21 W95-8905



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 26, 1995

EMPIRE

MIAMI, FL

SUBJECT: CARIBBEAN KEY, INC. Ref. Number: W95000008905

We have received your document for CARIBBEAN KEY, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Hope Sims Corporate Specialist

Letter Number: 495A00019756

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

Caribbean Key Inc.

ARTICLE II PRINCIPAL OFFICE

665 Snead Circle West Palm Beach FL 33413

ARTICLE III SHARES

100 Shares valued at \$1.00 per par

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

EVELYN SOTO 665 SNEAD CIRCLE WEST PALM BEACH, FL. 33413

ARTICLE V INCORPORATOR

Evelyn Soto 665 SNEAD CIRCLE WEST PALM BEACH FL 33413

The undersigned incorporator has executed these Articles of Incorporation this 5th day of April, 1995.

Signature,

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 STATEMENTS IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

Caribbean Key Inc.

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

Evelyn Soto 665 Snead Circle West Palm Beach, FL 33413

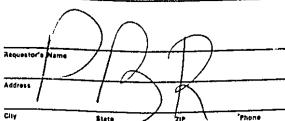
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating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

Signature)

Date

Charter Number Only

4-25-95



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CORPORATION(S) NAME

X) Profit) NonProfit () Amendment () Merger) Foreign) Dissolution) Mark) Limited Partnership) Annual Report) Other

) Reinstatement) Reservation) Change of Registered Agent

(X) Certified Copy) Certificate Under Seal () Photo Copies

() Call When Ready () Call If Problem () Atter 4:30 Walk In Pick Up () Mail Out () Will Walt-

Document Examiner Updater Acknowledgment w.P. Verifier

CERTIFIED COPY

MPIRE Toll Free: 1-800-432-3028