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FLORIDA DIVISION OF CORPORATIONS

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DEPARTMENT OF STATE

8744 NW 133RD ST

STATE OF FLORIDA

409 EAST GAINES STREET

MIAMI FL 33176-592902-

TALLAHASSEE, FL 32399

CONTACT: JENNIFER BENSCH

FAX: (904) 922-4000

PHONE: (305) 230-2226

FAX: (305) 230-6422

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: COMFONE, INC.

CURRENT STATUS: REQUESTED

FAX AUDIT NUMBER: H9500000072

TIME REQUESTED: 14:09:55

DATE REQUESTED: 07/21/1995

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CERTIFICATE OF STATUS: 1

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FLORIDA DEPARTMENT OF STATE
Sandra B. Morilham
Secretary of State

July 21, 1995

CONTINENTAL STAMP & SEAL

MIAMI, FL 33176

SUBJECT: COMFONE, INC.
REF: W95000014786

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

Section 15.16(3), Florida Statutes, requires each document to contain in the lower left-hand corner of the first page the name, address, and telephone number of the preparer of the original and, if prepared by an attorney licensed in this state, the preparer's Florida Bar membership number.

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

SEE REGISTERED AGENT CERTIFICATE.

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) 487-6934.

Loria Poole
Corporate Specialist

FAX Aud. #: H95000008072
Letter Number: 795A00035011

Division of Corporations - P.O. Box 6327 - Tallahassee, Florida 32314

H950000008072

ARTICLES OF INCORPORATIONOFCONFONE, INC.

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: CONFONE, INC.

ARTICLE II PRINCIPAL OFFICE

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

800 NORTH MIAMI AVENUE, SUITE #903
MIAMI, FL. 33136

ARTICLE III CAPITAL STOCK

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

5 MILLION SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JUAN R. FIGUEROA.
800 NORTH MIAMI AVENUE, SUITE #903
MIAMI, FL. 33136

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JENNIFER BENSCH
CONTINENTAL STAMP & SEAL
8744 S.W. 133 STREET
MIAMI, FL 33176-5929
(305) 232-2226

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JUL 24 1995
CLERK OF DISTRICT COURT
MIAMI, FLORIDA

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ARTICLE V INCORPORATOR(S)

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

JUAN R. FIGUEROA
800 NORTH MIAMI AVENUE, SUITE #903
MIAMI, FL. 33136

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

21 day of JULY, 1995.

 / PRESIDENT
Signature/Title

Signature/Title

Signature/Title

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**CERTIFICATE OF DESIGNATION
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 designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: COMFONE, INC.

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

JUAN R. FIGUEROA
(NAME)
800 NORTH MIAMI AVENUE, SUITE #903
(P.O. BOX NOT ACCEPTABLE)
MIAMI, FL. 33136
(CITY/STATE/ZIP)

SIGNATURE [Signature]

(Corporate Officer)

TITLE PRESIDENT

DATE JULY 21, 1995

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 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 [Signature]

DATE JULY 21, 1995

REGISTERED AGENT FILING FEE: \$35.00

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TALLAHASSEE, FLORIDA