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((H95000009012))) ELECTRONIC FILING COVER SHEET
TO: DIVISION OF CORPORATIONS FROM: ALLSTATE PROFESSIONAL SERVICES, INC.
DEPARTMENT OF STATE 1800 S.W. 1 STREET, SUITE 309
STATE OF FLORIDA
409 EAST GAINES STREET MIAMI FL 33135-00009-0000
TALLAHASSEE, FL 32399 CONTACT: ROLANDO TRUJILLO
AXI (904) 922-4000 PHONE: (305) 541-0790
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((H95000009012))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: ALLSTATE PROFESSIONAL SERVICES, INC.
FAX AUDIT NUMBER: H95000009012 CURRENT STATUS: REQUESTED
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ENG 11-01100 TO NOTARY

95 AUG 16 AM 8:05

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ARTICLES OF INCORPORATION

OF

ALLSTATE PROFESSIONAL SERVICES, 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: ALLSTATE PROFESSIONAL SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

1800 S.W. 1 Street, Suite 309
Miami, FL 33135

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 Shares of Common Stock, \$1.00 Par Value.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Gustavo Martinez
1800 S.W. 1 Street, Suite 309
Miami, FL 33135

Prepared by: Gustavo Mark
1800 Sw 1 St.
309
Miami, FL 33135
Tel: (305) 547-963

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ARTICLE V INCORPORATION

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

Gustavo Martinez, President
1800 S.W. 1 Street, Suite 309
Miami, FL 33135

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

11 day of August, 1995.

X 

Signature

Signature

Signature

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

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: ALLSTATE PROFESSIONAL SERVICES, INC.

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

Gustavo Martinez

(Name)

1800 S.W. 1 Street, Suite 309

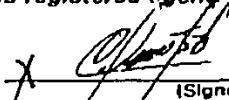
(P.O. Box not acceptable)

Miami, FL 33139

(City/State/Zip)

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TALLAHASSEE, FLORIDA

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.

X 
(Signature)

August 11, 1995

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL

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