CAPITAL CONNECTION, INC. 417 E. Virginia St., Suite 1, Tallahassee, FL 32.901 (904)224-8870 Mailing Address Poot Office Dan 1049, Tallahassee, FL 32.302 TOLL FREE No. 1-800-342-8062 FAX (904) 222-1222 NAME FIRM ADDRESS Prosting Coup. Pilo Corp. Flee Corp. Pilo Corp. Pilo

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Please remit invoice number with payment TERMS: NET 10 DAYS FROM INVOICE DATE 1 1/2% per month on Past Due Amounts Past 30 Days, 18% per Annum.

THANK YOU from Your Capital Connection

ARTICLES OF INCORPORATION

		of	144	$H_{\bullet}(\mathbb{S})$
	INTERNAT	of IONAL CONBULTANTS C (name of corporation)	F AMERICA, INC.	and the factor
ettlere erreiter	malana di	(name of corporation)	10 T C L	16 AH 10:53
corporation	rsigned subscriber(s) to these A on under the laws of the Stat	rticles of Incorporation, natural c of Plorids.	person(s) competentibles	ntract, horoby form a ASSEE, FLORIDA
the		ARTICLE I - CORPORATE I		
ino mini	o of the corporation is: TNTERNATIONAL	CONSULTANTS OF AMER	ICA, INC.	i.
		ARTICLE II - DURATIO		
This corp	oration shall exist perpetually	unless dissolved according to	Florida law.	
	•	ARTICLE III - PURPOS	E	
The corpo	pration is organized for the purates and the State of Florida	pose of engaging in any activiti	es or business permitted u	nder the laws of the
The corpo	pration is authorized to issue O	ARTICLE IV - CAPITAL ST	<i>OCK</i> ures (100) of ONE	:
Dollar(s)	(\$ <u>1.00</u>) pa	r value Common Stock, which		
			-	
The name	and street address of the Ir. ALSO THE MAILING	INITIAL REGISTERED OF ditial Registered Agent of this ADDRESS FOR THE COR	Corporation is:	
ME	ANNAMARIE E. KIP	ER		
DRESS	105 MEADOWLARK D			
Y	ROYAL PALM BEACH	FLORIDA	ZIP	33411
increased	ARTICL oration shall have ONE or diminished from time to to of the initial director(s) of the	me by the By-Laws, but shall	tatan a an	ectors may be either). The names and
AME	ANNAMARIE E. KIPE	R	•	
DDRESS	105 MEADOWLARK DR	IVE		
ITY	ROYAL PALM BEACH	STATIFLORIDA	ZIP	33411
IAME				
DDRESS				
ITY		STATE	ZIP	
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CITY

STATE

ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the person(s) signing these Articles of Incorporation are as follows:

NAME ANNAMARIE E. KIPER	and the same of th	
ADDRESS 105 MEADOWLARK DRIVE	وووا بالبينينين إفراقه المستحدد المستحدد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد	
CITY ROYAL PALM BEACH	STATE FLORIDA	ZIP 33411
NAME		
ADDRESS		######################################
CITY	SIATE:	2.00
NAME		
ADDRESS		**************************************
CITY	2.04.1.F	
		<u> </u>
N WITNESS WHEREOF, the undersigned subsc	riber(s) have executed these Articles of	Incorporation this 14
lay ofFEB, 19 96 .	, and the same of	
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	- Jone doubles	(Scal
		(Seal
		(Scal)
STATE OF FLORIDA		
SIATE OF FLORIDA) SS	•	
COUNTY OF PALM BEACH		
pefore me, a Notary Public authorized to take ack	nowledgements in the State and Coun	ty set forth above merconally
appeared	The state of the s	ty set forth move, personany
ANNAMARIE E.	KIPER	
known to me and known to be the person(s)		of Incorporation, and who
acknowledged before me that SHE exec	uted these Articles of Incorporation.	
	•	
M WITMESS WILDERSON II I I I I I I I I I I I I I I I I I		
N WITNESS WHEREOF, I have hereunto affixed	my hand and seal, in the State and Cou	nty aforesaid, this 14
day of <u>FEB.</u> , 19 96.		•
('.O	110
(Notary Seal)	Marie Balle State of Florida	Wn
(Holary Star)	(Notary Public, State of Florida at Large))
CAROLE LINON	My Commission expires:	
CARRIE L NIXON		

CARRIE L. NIXON
COMMISSION & CC 488095
EXPIRES AUG 27, 1999
BONDED THRU
ATLANTIC BONDING CO., INC.

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

From The Francisco

CERTIFICATE OF REGISTERED AGENT

96 FEB 16 AN IO 53

OF

BECKERARY OF STATE
TALLAMASSEE, FLORIDA

INTERNATIONAL CONSULT	I'ANTS OF	AMERICA,	INC
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(name of corporation)

Pursuant to Florida Statutes Sections 48,091 and 607.034, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

nt 105 MEADOWLARK DRIVE

ROYAL PALM BEACH, FLORIDA 33411

has named ANNAMARIE E. KIPER

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(revistered ovent)