417 E. Virginia St., Suite 1, Tallahassee, Fl. 32301, (904)224-8870 Mailing Address: Post Office Box 10349, Tallahassee, FL 12302 TOLL FREE No. 1-800-342-8062 FAX (904) 222-1222

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

THANK YOU trom Your Capital Connection



April 18, 1996

CAPITAL CONNECTION, INC. P O BOX 10349 TALLAHASSEE, FL 32302

SUBJECT(IMV DISTRIBUTORS, INC. Ref. Number: W96000008418

We have received your document for IMV DISTRIBUTORS, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Fiorida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

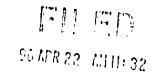
When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

If you have any questions concerning the filling of your document, please call; (904) 487-6915.

Pamela Hall Document Specialist

Letter Number: 096A00018291



ARTICLES OF INCORPORATION OF INV DISTRIBUTORS, INC.

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
The name of the corporation shall be:
INV Distributors, Inc.

Article II, Mailing Address
The mailing address of this corporation shall be:
6069 Silk Oak Drive, Orlando, FL., 32819.

Article III, Shares
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1000 Shares with \$ 1.00 Par Value.

Article IV, Initial Registered Agent and Street Address The name and address of the initial registered agent is:

Luiz Souza 6069 Silk Oak Drive, Orlando, Fl., 32819.

Article V, Incorporator.

The name and address of the Incorporator to these Articles of Incorporation is:

Sutton & Associates Address 5850 Lakehurst Drive Suite 100, Orlando, FL., 32819 Continuation, Pag.2

Article VI, Purpose.

The purpose of this corporation shall be to commerce, sell, buy, import and export all types of merchandise goods and services, as well as to be the representative of other companies if so is desired. This Corporation will trade with international and national corporations and individuals alike, always respecting the regulations existing in those areas. These objectives should not affect the capability to do all other businesses under the Laws of the United States of America and the State of Florida.

Article VII, Initial Board of Directors and Officers.

The names and Post Office Addresses of the members of the first board of directors and Officers are:

Marcelo Fontana - President and Director

Luiz Souza - Vice President and Secretary

Postal address at: 6069 Silk Oak Drive, Orlando, Fl., 32819.

Continuation, Pag. 3

Affidavit

State of Florida, Orange County.

Before me this day personally appeared Donald A. Sutton, President of Sutton & Associates, who being duly sworn, depose and say that she is the Incorporator of Distributors, Inc. and is hereby duly authorized, responsible and apt to Incorporate according to the Statutes or the State of Florida.

Sutton & Associates
Donald A. Sutton

Sworn to and subscribed before me this April 17th , 1996.

JOSE M ALMEIDA
COMMISSION # CC 520334
EXPIRES DEC 22, 1999
BONDED THRU
ATLANTIC BONDING CO INC

otary Public

CERTIFICATE OF DESIGNATION OF 1

REGISTERED AGENT/REGISTERED OFFICE

TALLAMASSEE, FLORIDA

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

1. The name of the corporation is:	INV DISTRIBUTORS, INC
2. The name and address of the regi	stered agent and office is: $SOUZA$
6069 5il	(Name) -K OAK DRIVE
ORIANDO	Box not acceptable)

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.

UIZ SOUZA

DONALD A. SUTTON Notary Public, State of Florida My Comm Expires May 31, 1998 No. CC 376691 Bonded Thru Official Notary Bernice