## P9600053194

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

				+++1	<u></u>	나 걸음, 놀다
SUBJECT:	Traba	jos de Trib.,	Corporation			
.,	(P	roposed corporate n	amo - must include suf	fix)		
*PLEASE NOTE:	The Engl	ish translat: of Tribe Co	ion for Trabajo rporation.	os de Tribu	Corporati	on
Enclosed is	s an original		py of the articles of		and a check	
	\$70.00 ling Fee	\$78.75 Filing Fee & Certificate	X \$122.50 Filing Fee & Certified Copy	] \$131.25 Filing Fee, Certified Copy & Certificate		
			Additional Copy		H., Q	
	FROM:	Douglas Lines			96 JUN 20	
	<b>, , , 2</b> , , , ,	Name (printed or typed)			•0''	1
		112 E	ast Concord St	reet	ing.	
			Address		SET .	ن ا
		Orland	do, Florida 32	2801	Dim.	-
			y, State & Zip			
		407-6	49-9677			
			Telephone number	<del></del>		

JUN 2 1 1996 BSB

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

FILED

OF

96 JUN 20 PH 1:38

TRABAJOS DE TRIBU CORPORATION TALLAHASSEE, FLORIDA

The undersigned, acting as incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation for such corporation.

FIRST: The name of the corporation is Trabajos de Tribu Corporation.

SECOND: The period of duration of the corporation is perpetual.

THIRD: The purpose or purposes for which the corporation is organized are to engage in any activity or business permitted under the laws of the United States and of the State of Florida.

FOURTH: The number of shares of stock that this corporation is authorized to have outstanding at any one time is 10,000.

FIFTH: The initial street address in Florida of the initial registered office of the Corporation is 924 North Magnolia Avenue, Suite 317, Orlando, Orange County, Florida 32803, and the name of the initial registered agent at such address is Robert Bruce Bisson.

SIXTH: The name and address of the initial incorporator is:

Robert Bruce Bisson, 924 North Magnolia Avenue, Suite 317, Orlando, Orange County, Florida 32803.

SEVENTH: The holders of the common stock of this corporation shall have preemptive rights to purchase, at prices, terms and conditions that shall be fixed by the Board of Directors, such of the shares of the stock of this corporation as may be issued for money (money, or any property or services) from time to time, in addition to that stock authorized (authorized and issued) by the corporation. The preemptive right of any holder is determined by the ratio of the authorized (authorized and issued) shares of common stock held by the holder of all shares of common stock currently authorized (authorized and issued).

EIGHTH: The address of the principal office is 924 North Magnolia Avenue, Suite 317, Orlando, Orange County, Florida 32803.

NINTH: The name and address of the person who shall serve as director until the first annual meeting of shareholders, or until a successor shall have been elected and qualified is as follows:

Robert Bruce Bisson, 924 North Magnolia Avenue, Suite 317, Orlando, Orange County, Florida 32803.

The undersigned incorporator has executed these Articles of Incorporation this 18th day of June, 1996.

Robert Bruce Bisson

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

1. The name of the corporation is: Trabajos de Tribu Corporation
2. The name and address of the registered agent and office is:
Robert Bruce Bisson (NAME)
924 North Magnolia Avenue, Suite 317 (P.O. Box or Mail Drop Box NOT ACCEPTABLE)
Orlando, Florida 32803 (CITY/STATE/ZIP)

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 positiv. as registered agent.

Hort B. B. (SIGNATURE) (DATE)