P960000 75393

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

©00000019469719 -09/19/96--01036--007 ****131.25

SUBJECT:(P		NO AVANCE, 1			
Enclosed is an original for : \$70.00 Filing Fee	and one (1) co \$78.75 Filing Fee & Cordificate	py of the articles of \$122.50 Filing Fee & Cordfied Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate	nd a check	4
FROM:	REGIN Name (IA SMIT-ELES	TALDE	-10 ⁹⁰	
	910	CAPRI ST. Address			
		GABLES, FL y, State & Zip	<u>. 33134</u>	96 SEP	11 tenta 1 1 1 1
1/30/01/0	(305) Daytime	Telephone number		10 PH 2: 42	

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

August 27, 1996

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

Dear Sir/Madame:

With regards to your letter Ref. Number: W96000015945, enclosed please find the official check that was issued for the incorporation. Somehow it was mistakenly left out of the initial application.

Per your request the translation for the corporation name, which is "Publicidad Avance, Inc." is Advance Advertising.

If you should have any other questions, please feel free to contact me at (305) 444-5544.

Most-Sincerely,

Řeginá Smit-Elejaldo

RSE/me



July 30, 1996

REGINA SMIT-ELEJALDE 910 CAPRI STREET CORAL GABLES, FL 33134

SUBJECT: PUBLICIDAD AVANCE', INC.

Ref. Number: W96000015945

We have received your document for PUBLICIDAD AVANCE', INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$131.25.

Please provide an English translation for the entity's name in your cover letter.

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) 487-6923.

Doris McDuffle Corporate Specialist Supervisor

Letter Number: 496A00036588

ARTICLES OF INCORPORATION

96 SEP 10 PH 2: 42

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business UNIC Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PUBLICIDAD AVANCÉ, INC.

ARTICLE II PRINCIPAL OFFICE

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

910 CAPRI STREET
CORAL GABLES, FL. 33134

ARTICLE III SHARES

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

100-SHARES ONE HUNDRED SHABES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

REGINA SMIT-ELEJALDE 910 CAPRI STREET CORAL GABLES, FL 33134

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

REGINA SMIT-ELETALDE - PRESIDENT
REGINA SMIT-ELETALDE - VICE PRESIDENT
REGINA SMIT-ELETALDE - SECRETARY
REGINA SMIT-ELETALDE - TREASURER

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

18 th day of Juxe 19 96.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF SEP 10 PH 2042

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDATSTATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF THE FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	PUBLICIDAD AVANCE, INC.
2. The name and address of the reg	sistered agent and office is:
<u></u>	CINA SMIT - ELEJALDE (NAME)
(P.O.)	GIO CAPRI STREET Box or Mail Drop Box NOT ACCEPTABLE)
CORAL	CONTY/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 position as registered agent.

(SIGNATURE