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

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1		ame (printed or typed) West Flagler Street #	1 3 S T T
	Miam	Address 1 Floriba 33154 City, State & Zip	30 M 10: 53
Eugenio AUTORIZATION B	Y PHONE TO Day	C44 - 995C	DATE A

SUBJECT: CAR. bbeAN MARKEHUG CORPORATION

(Proposed corporate name - must include suffix)

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



ARTICLES OF INCORPORATION

The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Article I Name

The name of the corporation shall be: Caribbean Marketing Corporation.

Article II Principal Office

The principal place of business and mailing address of this corporation shall be: 3881 West Flagler Street, #133, Miami, Florida 33134

Article III Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $\[one \]$.

Article IV Initial Registered Agent and Street Address

The name and address of the initial registered agent is: Eugenio N. Urriarte, President, 3881 West Flagler Street, #133, Miami, Florida 33134.

Article V Incorporators

The names and street addresses of the incorporators to these Articles of Incorporation are:

Mercy Urriarte, Secretary, 3881 West Flagler Street, #133, Miami, Florida 33134

Eugenio J. Urriarte, Treasurer, 3881 W. Flagler Street, #133, Miami, Florida 33134.

The undersigned incorporators have executed these Articles of Incorporation this 24th day of September, 1996.

Signature

Signature

Cugine Chorito Signature

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:	CARIBBEAN MARKEFING	Conporation
2. The name and address of the regis	stered agent and office is: N. URRIACTE (NAME)	96 SEP 30
3881 Wes (P.O. Bo	T Flagler Street # 133 ox or Mail Drop Box NOT ACCEPTABLE) Florida # 33134 (CITY/STATE/ZIP)	My 10: 53 EE. 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.

Cuguno alcunte 9/24/96 (SIGNATURE) (DATE)