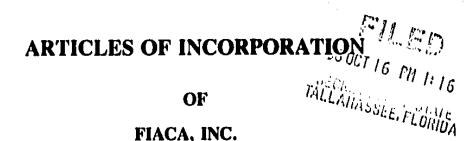
7	j	RPORATE INDUSTRIES, INC. Requestor's Name AVENUE SUITE: 16 Address	SE OCT 16 PIL 1:16 MELANASSEE: FLORIDA
	Clty/Stat LOCAL REPRE	RIDA 33174 (305)552-5973 CZip Phone# SENTATIVE TALLAHASSEE N NAME(S) & DOCUMENT NUM	Office Use Only
	1. <u>FIA CA</u> (Co) / / C . operation Name) (D	ocument #) (3000011,51776013
	4.	rporation Name) (De	-10/1679601096006 ****122.50 ****122.50 ocument#)
		Pick up time	Certified Copy Certificate of Status
	Profit NonProfit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name Name Reservation	Amendment Resignation of R.A., Officer/ Direct Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION Foreign Limited Partnership Reinstatement Tradework	RECEIVED 96 OCT 16 AHII: 23 OLVISION OF CORPORATION
		Trademark Other	



The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:

FIACA, INC.

The principal address of this corporation shall be:

1080 N.W. 163RD DRIVE MIAMI, FL. 33169

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities for business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation. General practitioner.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock have a par value of \$1.00 per share.

ARTICLE IV. ADDRESS

The street address of the initial registered office of the corporation shall be 1080 N.W. 163RD DRIVE, MIAMI, FL. 33169 and the name of the initial registered agent of the corporation at that address JUAN JOSE PINO .

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. SPECIAL PROVISION

This corporation shall have officer(s) and Director(s), initially. The name and street address of the initial officer(s) and director(s) who shall hold office for the first year of the corporation, of until his successor is elected or appointed are/is:

JUAN JOSE PINO PRESIDENT 1080 N.W. 163RD DRIVE, MIAMI, FL. 33169

ARTICLE VII. SUBSCRIBER

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

JUAN JOSE PINO 1080 N.W. 163RD DRIVE MIAMI, FL. 33169

In WITNESS WHEREOF, the undersigned has hereunto set her hand and seal on this ____ day of OCTOBER, 1996.)

(SEAL)

State of Florida	
County of Broward	
The foregoing instrument was acknowledged before me thi day of <i>OCTOBER</i> , 1996, by	a
Notary Public, State of Florida at Large	
My Commission Expires	

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service of process within Florida, naming agent upon whom process may be served In compliance with section 48.091, Florida Statutes, the following is submitted: First that FIACA. INC. (Name of Corporation) Desiring to organize or qualify under the laws of the State of Florida, with its principle place of business at city of MIAMI (City) State of FLORIDA , has named JUAN JOSE PINO (State) (Name of resident agent) 1080 N.W. 163RD DRIVE Located at (Street address and number of building) (Post office box addresses ARE NOT acceptable) ___, State of Florida, as its_agent to accept City of MIAMI (City) services of process within Florida, SIGNATURE (Corporaté officer) TITLE DATE Having been named to accept service of process for the above stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the profer and complete performance of my duties. SIGNATURE 4

DATE

(Resident agent)

Certificate designated place of business or domicile for the

CERTIFICATE OF DESIGNATION 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:	
FIACA, INC.	
2. The name and address of the registered agent an	d office is:
JUAN JOSE PINO	
(Namo)	
1080 N.W. 163RD DRIVE	
(P.O. BOX NOT ACCEPTABLE)	V17
MIAMI, PLORIDA 33169	ALLAHASSECRETS
(City/State/Zip)	တို့္ကဲ့ တ
SIGNATURE	1: 16 FLORI
(Corporate officer)	R R R R
TITLE	A
111115	
DATE	•
	•
Having been named as registered agent and to acc	ept service of
process for the above stated corporation at the plac this certificate, I hereby accept the appointment	e designated in . as registered
agent and agree to act in this capacity. Further a	agree to comply
with the provisions of all statutes relating to complete performance of my duties, and I am fam.	the proper and
accept the obligations of my position as registered	i agent.
CTONATURE	
SIGNATURE N	·
DATE /	