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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS FAX #: (904)922-4001

FROM: FAS-T CORP. AGENTS, INC. ACCT#: 071001002335
CONTACT: LIDIA FERNANDEZ
PHONE: (305)599-0839 FAX #: (305)716-0346

NAME: LATIN-MED SYSTEMS, INC.
AUDIT NUMBER.....H96000015533
DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.
CERT. OF STATUS..0 PAGES..... 3
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ARTICLES OF INCORPORATION

OF

LATIN-MED SYSTEMS, INC.

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96 NOV -5 PM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the corporation shall be: LATIN-MED SYSTEMS, INC.

The principal place of business of this corporation shall be: 4995 N.W. 72nd Ave., Ste: 405
Miami, Fl 33166

ARTICLE II NATURE OF BUSINESS

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

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: 500 Shares at $0.01 Par Value.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

PRESIDENT: Elisabete Fernandes Almeida 4995 NW 72nd Ave., Ste: 405
75% Of the Shares Miami, Fl 33166

V/PRESIDENT: Alexandre Gimenes Loreti 4995 NW 72nd Ave., Ste: 405
25% Of the Shares Miami, Fl 33166

Prepared by: Elisabete Fernandes Almeida
4995 NW 72nd Ave., Ste: 405
Miami, Fl 33166
(305) 406-9722

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ARTICLE VI INCORPORATOR(S)

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

Elisabete Fernandes Almeida
4995 N.W. 72nd Ave., Ste: 405
Miami, Fl 33166

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

4 day of NOVEMBER, 1996.

Signature/Title

Signature/Title

Signature/Title

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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 tate 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: LATIN-MED SYSTEMS, INC.

2. The name and address of the registered agent and office is:

Elisabete Fernandes Almeida
(NAME)

4995 N.W. 72nd Ave., Ste: 405
(P.O. BOX NOT ACCEPTABLE)

Miami, Fl 33166
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

SIGNATURE A Almeida
(corporate officer)

TITLE President

DATE November 4, 1996

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 A Almeida

DATE November 4, 1996

REGISTERED AGENT FILING

996 Thursday, December 19, 7:11 PM

P96000090582

LATIN-MED SYSTEMS, INC.

Florida Department of State
Division of Corporations
Corporate Records

This is a request for a change of mailing address of our corporation, so that we may receive any future mailings at our post office box.
Our new mailing address will be : **P.O.Box 52-2168**
Miami, Fla 33152-2168

We appreciate your help in this matter.

Elisabete F. Almeida
president
Latin-Med Systems Inc.
4995 NW 72nd Ave
Miami, Fla 33166
The document **number of our corporation** is: P96000090582
authentication code : 896A00050721-110596-P96000090582-1/1

KS 1/2/4

4995 NW 72 Avenue Suite #405, Miami, FL 33166
PHONE (305) 406-9722 FAX (305) 406-9752
E-MAIL latinmed@bridge.net