Charter # Only DATIO Requestor's Name 0 Jimenez and Associates, P.A.
A PROFESSIONAL ACCOUNTING CORPORATION
454 N.W. 22nd AVE, SUITE 209 Z Address MIAMI, FLORIDA 33125 City State ZIP Phone # 541-4714 900002098439--0 -02/26/97--01057--010 . ****122.50 ****122.50 CORPORATION(S) NAME IMMUNO-AMAZONIA PROFIT . I NON-PROFIT) AMENDMENT MERGER FOREIGN) DISSOLUTION) MARK I LIMITED PARTNERSHIP () ANNUAL REPORT RESERVATION I REINSTATEMENT OTHER I CERTIFIED COPY) CERTIFICATE UNDER SEAL () PHOTO COPIES () WALK IN () WILL WAIT () PICK UP () MAIL OUT I CALL 1 AFTER 4:30 Name Availability Document Examiner Updater Updater, Verifyo Acidiowledgement

CR2E031 (R4-84)

ARTICLES OF INCORPORATION

OF

IMMUNO-AMAZONIA, INC.

We the undersigned incorporate for the purpose of becoming a corporation under the laws of the State of Florida, providing for the formation, rights, privileges, immunities - and liabilities of incorporation for profit and subject to the following provisions.

ARTICLE I

The name of the corporation shall be: IMMUNO-AMAZONIA, INC.

ARTICLE II

This corporation shall have perpetual existence.

ARTICLE III

ARTICLE IV

The agregate maximum number of shares which this corporation shall have authority to issue and have outstanding at anyone time is: Five Hundred Shares at One Dollar Value.

ARTICLE V

This corporation shall begin business with no less than -- Five Hundred dollars (\$500.00)

ARTICLE VI

The post office address of the principal office of this -- corporation shall be: 454 N.W. 22nd Avenue, Suite 209, Miami, Florida 33125.

ARTICLE VII

The name and address of the initial Registered Office of -- this corporation in the State of Florida is:

Alejandro Alvarez 1223 S.W. 138 Place Miami, Florida 33184

ARTICLE VIII

The business of the corporation shall be managed by a Board of Directors. The number of Directors, no less than one, no more than five and shall be fixed by resolution of the ----stockholders at regular or special meetings, subject to the manner of holding such meetings prescribed by the by-laws.

ARTICLE IX

The name and post office address of the members of the Board of Directors who shall serve as members thereof, are as ---- follows:

NAME	OFFICE	ADDRESS
Alejandro Alvares	President	1223 S.W. 138 Place Miami, Fla. 33184
Anabel Gracia	Secretary	1223 S.W. 138 Place Miami, Fla. 33184

ARTICLE X

Distribution to incorporators is as follows:

Alejandro Alvarez	-0-	-0-
Anabel Gracia	-0-	-0-

All shares remain unissued.

ARTICLE XI

Each stockholder before offering to sell or otherwise dispose of the stock of this corporation, owned by him first offer -- such stock to the remaining stockholders of this corporation and obtaining their refusal to purchase same, proceed to sell at the fair market value thereof.

ARTICLE XII

Amendments to the Articles of Incorporation, merger, consolidations or dissolution shall be approved and submitted to the stockholders for approval 100% of all votes will be necessary and thirty days notice shall be provided.

ARTICLE XIII

This corporation shall have full power to carry on and transact each or all business enumerated in Article III of this -- Articles of Incorporation. Shall have all the general and --- additional powers now conferred upon it by the laws and the -by-laws.

IN WITNESS THEREOF, we the undersigned, have made subscribed and acknowledged these Articles of Incorporation, on this -- 3rd Day of February 1997.

Alejandro Alvarez-Ingorporator

Analel Gracia

Anabel Gracia-Incorporator

STATE OF FLORIDA)
COUNTY OF DADE)

who after first being duly sworn, executed the foregoing ---ARTICLES OF INCORPORATION, freely and voluntarily for the --purpose therein expressed.

IN WITNESS THEREOF I have hereunto set my hand and official - seal at Miami, said County and State, this 3rd Day of February 1997.

NOTARY PUBLIC State of Florida at large.

OFFICIAL NOTARY SEAL
JOSE DEPT NOTA
COMPLESION NO CC417480
MY COMPLESION OCT 30,1998

CERTIFICATE OF DESIGNATION REGISTERED AGENT=REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida -- Statues, 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.

The name of the Corporation is IMMUNO-AMAZONIA, INC.

The name and address of the Registered Agent and office is Alejandro Alvarez, 1223 S.W. 138 Place, Miami, Florida 33184.

Corporate Officer

Title: President

Dated: February 3, 1997.

Having been named to accept service of process for the above stated corporation, at the place designated in this certiff cate, I hereby agree to act in this capacity, and further -- agree, to comply with the provisions of all statues relative to the proper and complete performance of my duties; and --- accept the duties and obligations of section 607.325,, Florida Statutes.

Alejandro Alvarez-Registered Agent accepting office.