P97000064876 TRANSMITTAL LETTER

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

800002246918---5 -07/24/97--01093--007 *****78.75 ******78.75

SUBJECT:	ALBERTA PRODUCTIONS, INC. (Proposed corporate name - must include suffix)			
	•			
Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	
\$70.00	578.75	□\$122.50	□ \$131.25	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate	& Certified Copy	Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	MAXIMO SAMANIEG	30		
Name (Printed or typed)				
	MIAMI, FLORIDA 33144 City, State & Zip (305) 269-8933 Daytime Telephone number			
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City, State & Zip				
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(305) 269-8933				ي بي
	Daytime T	elephone number		56
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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The undersigned incorporator, 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:

ALBERTA PRODUCTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

5911 S.W. 6th 'STREET MIAMI, FL 3314'

ARTICLE III SHARES

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

1,000 COMMON SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: MAXIMO SAMANIEGO 5911 S.W. 6th STREET MIAMI, FL 33144

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

MAXIMO SAMANIEGO
5911 S.W. 6th STREET
MIAMI, FL 33144

Orc formatication

O7/22/97

Signature/Incorporator

Date

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

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 agreests agent.

Signature/Registered Agent Date