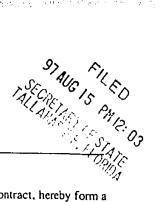
Requestor's Name Address City State ZIP		SECRETARIA STATE TALLANIA STATE STATE
CORPORATION(S) NAME	
Shop-S Profit NonProfit	hop, and	Toll Free:
() Foreign	() Dissolution	() Mark
() Limited Pertnership () Rainstatement	() Reservation	() Change of Registered Agent
() Cartified Copy () Call When Ready () Walk in () Will W		() Mark () Other () Change of Registered Agent () Certificate Under Seal () After 4:30 () Mail Out
Name Availability Document Examiner	<u>Certi</u>	TO PR
Updater Verifier Acknowledyment	K.R. AUG 1 5 1	1997

CR2E031 (R8-85)

ARTICLES OF INCORPORATION

of



SHOP-SHOP, INC.

(name of corporation)

The undersig corporation t	ned subscriber(s) to these Ai inder the laws of the State of	rticles of Incorporation, natural person(s) competent to contract, h Florida.	ereby	form a
The name of	the corporation is:	ARTICLE I - CORPORATE NAME		
	SHOP-SHOP, INC.		<u>-</u>	
This corpora	tion shall exist perpetually u	ARTICLE II - DURATION Inless dissolved according to Florida law.		
		ARTICLE III - PURPOSE		
	tion is organized for the purps s and the State of Florida.	pose of engaging in any activities or business permitted under the l	aws of	the
		ARTICLE IV- CAPITAL STOCK		
		ONE HUNDRED shares (100) of ONE Common Stock, which shall be designated "Common Shares".		
	ARTICLE	V - INITIAL REGISTERED OFFICE AND AGENT		
The street a	ddress of the Initial Register	ed Agent office and the name of the Initial Registered Agent at tha	t offic	e is:
NAME	JAVIER PALENQUE			
ADDRESS	8211 NW 68 ST			
CITY	Miami	FLORIDA	ZIP	33166
The princip	al office, if known, or the ma	ailing address of the corporation is:		
NAME	SHOP-SHOP , INC.			
ADDRESS	8211 NW 68 ST			
CITY	Miami	FLORIDA	ZIP 3	3166

ARTICLE VI - INITIAL BOARD OF DIRECTORS

NAME JAVIER PALENQUE ADDRESS 8211 NW 68 ST CITY MIAMI NAME ADDRESS CITY NAME ADDRESS	STATE FLORII	DA ZIP 33166 ZIP
NAME ADDRESS CITY NAME ADDRESS		
NAME ADDRESS CITY NAME ADDRESS	STATE	ZIP
NAME ADDRESS	STATE	ZIP
ZITY VAME ADDRESS	STATE	ZIP
ADDRESS		
SITY		
CITY	STATE	ZIP
ADDRESS 8211 NW 68 ST		
CITY MI AMI	STATE FLORI	DA ZIP 3316
CITY MI AMI NAME	STATE FLORI	DA ZIP 3316
CITY MI AMI NAME ADDRESS	STATE FLORI	DA ZIP 3316
CITY MI AMI NAME ADDRESS CITY		

CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

SHOP-SHOP, INC.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)