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FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: FAS-T CORP. AGENTS, INC.

ACCT#: 071001002335

CONTACT: LIDIA FERNANDEZ

FAX #: (305)716-0346

PHONE: (305)599-0839

NAME: LA CARIDAD DEL COBRE ALF INC.

AUDIT NUMBER..... H97000014525

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...1

PAGES..... 3

CERT. COPIES.....0

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ATTN: BECKY MCKNIGHT

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AND ANASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

September 3, 1997

FAS-T CORP AGENTS INC

SUBJECT: LA CARIDAD DEL COBRE ALF

REF: W97000020311

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any further questions concerning your document, please call (850) 487-6931.

Becky McKnight
Document Specialist

FAX Aud. #: B97000014525 Letter Number: 497A00044034

ARTICLES OF INCORPORATION

ARTICLE 1-NAME

The name of the Corporation is

LA CARIDAD DEL COBRE, INC.

ARTICLE 2-PURPOSE OF CORPORATION

The Corporation shall engage in any activity of business permitted under the laws of the United States and of the State of Florida.

ARTICLE 3-PRINCIPAL OFFICE

The address of the principal office of this Corporation is: 1310 SW 76 AVENUE MIAMI FL 33144

ARTICLE 4-INCORPORATOR

The name and street address of the incorporator of this Corporation is:

MAGALY CRUZ 1310 SW 76 AVE MIAMI FL 33144

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

and day of September. 1997.

Magaly 9

H97000014525

Prepared by: Credit Network Enterprises, Inc. 13500 North Kendall Drive Suite 260

Suite 260 Miami, Fl 33144 (305) 408-0091

ARTICLE 5- OFFICERS

The officers of the Corporation shall be:

President:

MAGALY CRUZ 1310 SW 76 AVENUE MIAMI FL 33144

ARTICLE 6-DIRECTOR(S)

The Director(s) of the Corporation shall be:

ARTICLE 7-SHARES

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

100 SHARES AT \$1.00 PAR VALUE

ARTICLE 8-REGISTERED OWNERS

The Corporation, to the extent permitted by law, shall be entitled to treat the person in whose name any share or right is registered on the books if the Corporation as the owner thereto, for all purposes, and except as may be agreed in writing by the Corporation, the Corporation shall not be bound to recognize any equitable or other claim to, or interest in, such share or right on the part of any other person, whether or not the Corporation shall have notice thereof.

ARTICLE 9-EFFECTIVE DATE

These Articles of Incorporation shall be effective immediately upon approval of the Secretary of State, State of Florida.

ARTICLE 10-AMENDMENT

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation, or in any amendment hereto, or to add any provision to these Articles of Incorporation or to any amendment hereto, in any manner now or hereafter prescribed or permitted by the provisions of any applicable statute of the State of Florida, and all rights conferred upon shareholders in these Articles of Incorporation or any amendment hereto are granted subject to this reservation.

CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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:

LA CARIDAD DEL COBRE, INC.

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

MAGALY CRUZ 1310 SW 76 AVE MIAMI FL 33144

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

DATE

PREPARE BY:

Credit Network Enterprises, Inc. 13500 North Kendall Drive Suite 260

Miami, FL 33144

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NICHASSEE, FLORD