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TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4001

FROM: EMPIRE CORPORATE KIT COMPANY
CONTACT: RAY STORMONT
PHONE: (305)541-3694

ACCT#: 072450003255

FAX #: (305)541-3770

NAME: CHELSTIN ENTERPRISES, INC.

AUDIT NUMBER.....H98000001480

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

CERT. OF STATUS..0

PAGES..... 3

CERT. COPIES.....0

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**ARTICLES OF INCORPORATION
OF
CHELSTIN ENTERPRISES, INC.**

I, the undersigned form a Florida corporation as follows:

1. **NAME:** The Corporation's name is **CHELSTIN ENTERPRISES, INC.**
2. **PURPOSE:** The Corporation's purpose is to engage in all business allowed under the laws of the State of Florida.
3. **STOCK:** The Corporation will have 1,000 shares of a single class with a par value of \$0.10 per share.
4. **INCORPORATOR:** The Incorporator of this Corporation is:

Name: Robert Novak
Address: 20584 N.E. 6TH Court
No. Miami Beach, Florida 33179
5. **REGISTERED AGENT:** The Registered Agent of this Corporation is:

Name: Victor K. Rones
Address: 16105 N.E. 18th Avenue
No. Miami Beach, FL 33162
6. **DIRECTOR:** The Director of this Corporation and address is:

Name: Robert Novak
Address: 20584 N.E. 6th Court
No. Miami Beach, Florida 33179
7. **PRINCIPAL PLACE OF BUSINESS:** The principal place of business of the Corporation is:

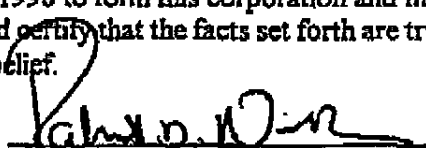
Address: 20584 N.E. 6th Court
No. Miami Beach, Florida 33179

Prepared by:
Victor K. Rones, Esq.
FBN: 245178
16105 N.E. 18th Avenue
No. Miami Beach, FL 33162
Phone: (305) 945-6522

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I sign these Articles on January 22nd, 1998 to form this corporation and file these Articles of Incorporation with the Secretary of State, and certify that the facts set forth are true and accurate to the best of my knowledge, information and belief.


Robert Novak, Incorporator

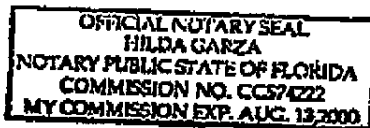
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STATE OF FLORIDA

COUNTY OF DADE

BEFORE ME, the undersigned authority, this day personally appeared, Robert Novak, who after being by me duly sworn, deposes and says that he is the person described in and who executed the foregoing Articles of Incorporation, and duly acknowledged to me that he executed same freely and voluntarily for the purpose therein expressed.

WITNESS my hand and official seal at Miami, Dade County, Florida on January __, 1998.




Notary Public, State of Florida

My Commission Expires:

Printed Name of Notary: Hilda Garza

I, VICTOR K. RONES, am named as Registered Agent in the Articles of Incorporation of CHELSTIN ENTERPRISES, INC., do and accept the designation as Registered Agent and agree to comply with all duties and with those requirements under Florida law for serving in the position of Registered Agent of the Corporation.

Dated at Miami, Dade County, Florida on January 22nd, 1998.


VICTOR K. RONES

Prepared By:
Victor K. Rones, Esq.
FBN: 245178
16105 N.E. 18th Avenue
No. Miami Beach, Fl 33163
Phone: (305) 945-6522

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