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8/05/98

FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850) 922-4001

FROM: FAS-T CORP. AGENTS, INC.
CONTACT: LIDIA FERNANDEZ
PHONE: (305) 599-0829

ACCT#: 071001002335

FAX #: (305) 716-0346

NAME: MAVECO INT'L, INC.

AUDIT NUMBER.....H98000014485

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

CERT. OF STATUS..1

PAGES..... 3

CERT. COPIES.....0

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Bm 8/5/98

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

MAVECO INT'L, INC.

ARTICLE II PRINCIPAL OFFICE

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

1265 SEMORAN BLVD
CASSELBERRY, FL 32707

ARTICLE III SHARES

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

20,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Edwin Ouano
1265 Semoran Blvd
Casselberry, FL 32707

Prepared by: Edwin Ouano
1265 Semoran Blvd.
Casselberry, FL 32707
(407) 384-2234

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Amelia Jose
27555 Hickory BLVD
Bonita Springs, FL 33923

EDWIN Ovano
1265 SEMORAN BLVD
CASSELBERRY, FL 32707
ASUNCION Ciceron
1265 SEMORAN BLVD
CASSELBERRY, FL 32707

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

10 day of July, 1998.

Amelia Jose
Signature

Edwin Ovano
Signature

Asuncion M.D.
Signature

Articles of Incorporation
Filing Fee-\$ 35

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 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: Maveco INT'L. INC.

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

Edwin Ovano
(Name)

1265 Seminole Blvd

(P.O. Box not acceptable)

Casselberry, FL 32707

(City, State, Zip)

Having been named as registered agent and to accept service of process for the above
stated corporation at the place designed 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.

Edwin Ovano
(Signature)

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