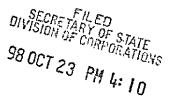
D9800090038 TRANSMITTAL LETTER



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

900002670909--8 -10/23/98--01027--012 ****122.50 ******78.75

SUBJECT: Metropres	ss Inc.		
	posed corporate name - must include suffix)		
Enclosed is an original ar	nd one (1) copy of the articles of incorporation		
	\$78.75 \(\psi\)\$122.50 \(\psi\)\$131.25	j	
FROM:	Gihan Perera		
	Name (printed or typed)		
	16375 N.E. 18 Avenue, Suite 315	_	
	Address		
·	_ North Miami Beach, FL 33162		
	City, State & Zip	_	
	(305) 919–7222		
	Daytime Telephone number	_	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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:

Metropress Inc.



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

16375 N.E. 18 Avenue

Suite 315

North Miami Beach, FL 33162

ARTICLE III SHARES

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

One thousand (1,000) shares of common stock having par value of one dollar (\$1.00) each

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Gihan Perera 16375 N.E. 18th Ave , Suite 315 North Miami Beach, FL 33162

ARTICLE V INCORPORATOR

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

Gihan Perera 16375 N.E. 18 Avenue, Suite 315 North Miami Beach, FL 33162

Signature/Incorporator

10.21 -98

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 obligations of my position as registered agent

| U - 21-9|

Signature/Registered Agent

Date