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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 541-3694
Fax Number : (305) 541-3770

FLORIDA PROFIT CORPORATION OR P.A.

SEABOARD TRADING COMPANY

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FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 19, 1999

EMPIRE

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TALLAHASSEE, FLORIDA

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 registered agent and street address must be consistent wherever it appears in your document.

PLEASE NOTE YOU HAVE WILLIAM Y. SAYAD, JR. ON THE REGISTERED AGENT PAGE, AND IN ARTICLE VI, YOU HAVE WILLIAM SAYAD. PLEASE MAKE HIS NAME CONSISTENT.

If you have any further questions concerning your document, please call (850) 487-6928.

Michelle Milligan
Document SpecialistFAX Aud. #: H99000006679
Letter Number: 199A00013882

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ARTICLES OF INCORPORATION

OF

SEABOARD TRADING COMPANY

These Articles are in compliance with Chapter 607, F.S.

Article I

The name of this corporation shall be:

SEABOARD TRADING COMPANY

Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

Article III

The principal place of business and mailing address of this corporation shall be: 1581 BRICKELL AVENUE #1006
MIAMI, FL 33129

Article IV

The general nature of business of this corporation is to transact any and all lawful business.

Article V

The number of shares which this corporation shall have authority to issue is 1,000 shares, having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

Article VI

The name and street address of the initial Registered Agent of this corporation shall be: WILLIAM Y. SAYAD, JR.
2121 PONCE DE LEON BLVD. #430
CORAL GABLES, FL 33134

PREPARED BY: RAY STORMONT, EMPIRE CORPORATE KIT COMPANY,
1492 WEST FLAGLER STREET, #200, MIAMI, FL 33135, (305) 541-3694

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Article VII

The initial board of Directors shall consist of a total of 4 person(s) and the name and address of the person(s) who are to serve as an initial director(s)

PETER BENITEZ
DIR./PRES.

1581 BRICKELL AVENUE #100G
MIAMI, FL 33129

ROSA BENITEZ
DIR./TREAS.

1581 BRICKELL AVENUE #100G
MIAMI, FL 33129

JORGE MOLINA
DIR./SEC.

1581 BRICKELL AVENUE #100G
MIAMI, FL 33129

PEDRO BENITEZ
DIR./VICE-PRES.


1581 BRICKELL AVENUE #100G
MIAMI, FL 33129

Article VIII

The name and address of the incorporator executing these Articles of Incorporation is:

EMPIRE CORPORATE KIT OF AMERICA, INC.
1492 WEST FLAGLER STREET #200
MIAMI, FL 33135

The undersigned has executed these Articles of Incorporation this 16TH day of MARCH, 1999.



Incorporator
Ray Stormont, President
Signing for
Empire Corporate Kit of America, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of section 607.0501, 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.

First that Seaboard TRADING COMPANY
(Name of Corporation)
desiring to organize under the laws of the State of FLORIDA
(Florida)
with its principal office, as indicated in the articles of
incorporation has named William V. Sayad, Jr.
(Name of Registered Agent)
located at 2121 Ponce de Leon Blvd. # 430
City of Coral Gables County of Dade
(City) (County)

State of Florida, as its agent to accept service of process within this state.

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

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