OFFIC LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Document #) (Document #) (Document #) (Corporation Name) Certified Copy Walk in Pick up time Certificate of Status Will wait Photocopy Mail out AMENDMENTS NEW FILINGS Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Limited Partnership Reinstatement **GEVISOBA** Trademark Other Examiner's Initials

ARTICLES OF INCÖRPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

ALCORT INC



ARTICLE II PRINCIPAL OFFICE

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

615 SUNSET DR. CORAL GABLES, FL 33143

ARTICLE III SHARES

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

ONE THOUSAND

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

FLFREDO JOSÉ CORTINA 615 SUNSET DR CORAL GABLES, FL. 33143

ARTICLE V INCORPORATOR(S)

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

ARTICLE VI DIRECTOR(S)

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

ALFREDO JOSE CORTINA 615 SUNSET DR CORAL GABLES, FL. 33143

Articles of Incorporation Filing Fee - \$35

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.

The name of the corporation is: <u>FL</u>	ORT INC
The name and address of the registered	
ALFREDO JOSE	CORTINA
(NAME)	A
615 SUNSET	DR.
(P.O. BOX NOT ACC	EPTABLE)
CORAL GABLES FL.	33143
(CITY/STATE/Z	

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.

SIGNATUR

DATE_

REGISTERED AGENT FILING FEE: \$35.00