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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number: 071001002335 Phone: (305)599-0839 Fax Number: (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

CARIBBEAN AND LATIN AMERICAN TRANSFER, INC.

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AL PAHASSLE. FLORIDA

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Estimated Charge	\$78. 75

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ARTICLES OF INCORPORATION

OF

CARIBBEAN AND LATIN AMERICAN TRANSFER, INC.

ARTICLE 1 - NAME

The name of the corporation shall be: Caribbean and Latin American Transfer, Inc.

The principal place of business of this corporation shall be:

200 Leslie Drive Hallandale, FL 33009

ARTICLE II - NATURE OF BUSINESS

This corporation shall engage in commerce within the United States, between the United States and foreign nations, between and among foreign nations on behalf of clients; provide, transfer and/or arrange financing on behalf of clients; and/or act in a consulting capacity between clients in the United States and foreign nations as permitted by the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III - CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: One Thousand Shares with a value of Ten Dollars per share.

ARTICLE IV - TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V - OFFICERS AND DIRECTORS

The names and street addresses of the initial officers and directors, if any, who shall hold office the first year of the corporation's existence or until their successors are elected, are:

Michael C. Cox -

Registered Agent/Director

200 Leslie Drive

Hallandale, FL 33009

Richard E. Brandon - Secretary/Treasurer

200 Leslie Drive

Hallandale, FL 33009

ARTICLE VI - INCORPORATOR (S)

The names and street addresses of the incorporators to this Articles of Incorporation are:

Michael C. Cox -

Registered Agent/Director

200 Leslie Drive

Hallandale, FL 33009

Richard E. Brandon - Secretary/Treasurer

200 Leslie Drive

Hallandale, FL 33009

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed this Articles of Incorporation this 17 day of Juni, 1999.

Signature(s) of Incorporator(s)

Michael C. Cox Fieland E. Frandon

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:

Caribbean and Latin American Transfer, Inc.

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

Michael C. Cox 1689 North Hiatus Road, PMB 1258 Pembroke Pines, FL 33026

SIGNATURE Muchael C. Cox

TITLE Registered Agent

DATE <u>6/17/99</u>

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

DATE

SIGNATURE

6/17/99

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