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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 : SCOTT G. VILLANUEVA - ATTORNI
Account Number : I19990000111
Phone : (305)591-1331
Fax Number : (305)591-1332

FLORIDA PROFIT CORPORATION OR P.A.

IllusionTechnology Vision, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

ARTICLE I - NAME

The name of the corporation shall be:

Illusion Technology Vision, Inc.

ARTICLE II - PRINCIPAL OFFICE

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

**7500 NW 25TH ST., SUITE 209
MIAMI, FLORIDA 33122**

ARTICLE III - SALES

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

1,000,000 SHARES

Scott G. Villanueva
7500 NW 25th Street, Ste. 209
Miami, FL 33122
Tel: 305-591-1331
Florida Bar #0033261

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**ARTICLE IV-INITIAL REGISTERED AGENT AND
STREET ADDRESS**

The name(s) and street address (es) of the initial registered agent is:

**SCOTT G.VILLANUEVA-ATTORNEY AT LAW
7500 NW 25TH ST., SUITE 209
MIAMI, FLORIDA 33122**

ARTICLE V - INCORPORATOR(S)

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

**SCOTT G.VILLANUEVA-ATTORNEY AT LAW
7500 NW 25TH ST., SUITE 209
MIAMI, FLORIDA 33122**

The undersigned incorporator (s) has (have) executed these Articles of Incorporation this
16th day of August, 1999



SCOTT VILLANUEVA

Notarization is not required.

Scott G. Villanueva
7500 NW 25th Street, Ste. 209
Miami, FL 33122
Tel: 305-591-1331
Florida Bar #0033261

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

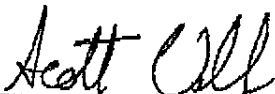
PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Illusion Technology Vision, Inc.**

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

**SCOTT G. VILLANUEVA -- ATTORNEY AT LAW
7500 NW 25TH ST., SUITE 209
MIAMI, FLORIDA 33122**

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 agrees 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.



SCOTT VILLANUEVA



(Date)

DIVISION OF CORPORATIONS, P.O. Box 6327, TALLAHASSEE, FL 32314

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