DATE 5/11/1999

orida Department of State	
ivision of Corporations 99 ED	
O Roy 6327	
allahassee, FL 32314 \	5:
TAMASSEE, FLOTATE	- 0
Re: A & M. Mortgage & Investments Co., Inc.	

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

Albert Soliva & Mauricio Fernandez
(Individual's Name)

70003042637--6
-11/12/99--01068--009
*****122.50 ******78.75

A & M. Mortgage & Investments Corp.

(Name of Corporation)

MAILING ADDRESS OF COR	PORATION				
4019 NW 7St					
Miami , FL 33126					
PHONE —					
(305) 665-4864	N/A				
Area Code Number	Ext.				

SEMINOLE FORM 215: TRANS. LETTER (2-98)

ARTICLES OF INCORPORATION

of

A	&	Μ.	Mortgage	۶,	Investments	Corpo	ration.
							4

(name of corporation)

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME

The name of the corporation is:

A & M. Mortgage & Investments Corporation.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue $\frac{1000}{}$ shares of common stock, par value $\frac{1.00}{}$ per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS 401	.9 NW 7St	TAR V.	- 1964.
CITY Miami		FLORIDA	ZIP 331 26
Mailing address, if d	lifferent		
STREET ADDRESS	N/A		- · · · · · · · · · · · · · · · · · · ·
CITY N/A		FLORIDA	ZIP

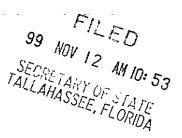
ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME Mauricio Fernandez	 		· · · · · · · · · · · · · · · · · · ·		
ADDRESS 4019 NW 7St	 			· · · · · · · · · · · · · · · · · · ·	-
CITY Miami	 	FLORIDA		ZIP 33126	,

	VII - INITIAL BOARD OF DIRECTORS (2) directors initially. The by the By-Laws, but shall never be less than cotion are as follows:	number of directors may be one (1). The names and
NAME Albert Soliva		: Like
ADDRESS 4019 NW 7St		
CITY Miami	STATE FL	ZIP 33126
NAME Mauricio Fernandez		
ADDRESS 4019 NW 7St		
CITY Miami	STATE FL	ZIP 33126
NAME		
ADDRESS		
CITY	STATE	ZIP
The names and addresses of the incorporators si	igning these Articles of Incorporation are as fo	llows:
ADDRESS 4019 NW 7St	- 7	Market and the second s
CITY Miami	STATE FL	ZIP 33126.
NAME Mauricio Fernandez		
ADDRESS 4019 NW 7St	-	***
CITY Miami	STATE FL	ZIP 33126
NAME	44	
ADDRESS		
CITY	STATE	ZIP
The undersigned incorporator(s) have exec	uted these Articles of Incorporation this	5th
Solo		(Signature) (Signature)
OFFICIAL NOTARY SEAL LORETA ARMADA NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC551603 MY COMMISSION EXP. APR. 30,2000 Form 275: ARTICLES OF INCORPORATION, PAGE 2	PAGE 2	(Signature) SEMINOLE-MIAMI (2-98

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE



A	&	Μ.	Mortgage	Έ.	Investments	Corporat	tion.
_					(name	of corporatio	n)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, organized under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 4019 NW 7St Miami, FL 33126

has named Mauricio Fernandez

located at the aforesaid address, as its registered 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)

(Date)