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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

: (305)716-0346 Fax Number

FLORIDA PROFIT CORPORATION OR P.A.

SYNERGY EXCHANGE PARTNERS INC.

Certificate of Status	0	10000
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ARTICLES OF INCORPORATION OF

SYNERGY EXCHANGE PARTNERS INC.

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

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

SYNERGY EXCHANGE PARTNERS INC.

The principal place of business of this corporation shall be: 1651 SW 2ND ST #2 MIAMI, FL. 33135

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under 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: 100 SHARES \$1.00 PAR VALUE

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

SHERYL PADILLA 11111 BISCAYNE BLVD. #3 SUITE 2055 MIAMI, FLORIDA 33181

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ARTICLE VI INCORPORATOR(S)

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The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

MIGDALIA ARVELO 1651 SW 2ND ST #2 MIAMI, FL. 33135

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 22ND day of DECEMBER 1999

Signature(s) of Incorporator(s)

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.

agent, in the state of florida.
1. The name of the corporation:
SYNERGY EXCHANGE PARTNERS INC.
2. The name and address of the registered agent and

Office is:
MIGDALIA ARVELO 1651 SW 2ND ST #2 MIAMI, FL. 33135

(P.O. BOX NOT ACCEPTABLE)

(CITY/STATE/ZIP)

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SLORESMAY OF STAFF

SIGNATURE

DIRECTOR

DATE 12/22 99

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 I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE

DATE

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