

Charter Number Only

8/4/99  
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Requestor's Name  
Address  
City State ZIP Phone

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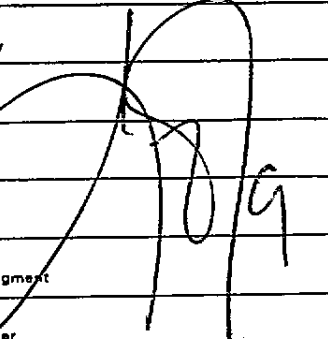
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\*\*\*\*\*78.75 \*\*\*\*\*78.75

CORPORATION(S) NAME

~~International Credit Bancorp Inc.~~

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Profit         | <input type="checkbox"/> Amendment       | <input type="checkbox"/> Merger                     |
| <input type="checkbox"/> NonProfit                 | <input type="checkbox"/> Dissolution     | <input type="checkbox"/> Mark                       |
| <input type="checkbox"/> Foreign                   | <input type="checkbox"/> Annual Report   | <input type="checkbox"/> Other                      |
| <input type="checkbox"/> Limited Partnership       | <input type="checkbox"/> Reservation     | <input type="checkbox"/> Change of Registered Agent |
| <input type="checkbox"/> Reinstatement             | <input type="checkbox"/> Photo Copies    | <input type="checkbox"/> Certificate Under Seal     |
| <input checked="" type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem            |
| <input type="checkbox"/> Walk In                   | <input type="checkbox"/> Will Wait       | <input checked="" type="checkbox"/> Pick Up         |
|  | <input type="checkbox"/> After 4:30      | <input type="checkbox"/> Mail Out                   |

FILED  
99 AUG -9 AM 11:42  
SECRETARY OF STATE  
TALLAHASSEE FL 32301  
RECEIVED  
99 AUG -5 AM 9:21

Name	
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Acknowledgment	
W.P. Verrier	

~~109-18124~~

**CERTIFIED COPY**



Empire Toll Free: 1-800-432-3028



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

August 5, 1999

EMPIRE

MIAMI, FL

SUBJECT: INTERNATIONAL CREDIT BANCORP INC.  
Ref. Number: W99000018134

We have received your document for INTERNATIONAL CREDIT BANCORP INC.. However, the document has not been filed and is being returned for the following:

Written approval and clearance of the terms BANK, BANKER, BANC, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION must be obtained from the Division of Banking and Finance, pursuant to section 655.922(2a), Florida Statutes. The address is:

Division of Banking  
Director's Office  
101 E. Gaines St.  
Fletcher Bldg., 6th Floor.  
Tallahassee, FL 32399-0350  
(850) 410-9111.

RECEIVED  
99 AUG -9 AM 8:57  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole  
Corporate Specialist

Letter Number: 299A00039708

# ARTICLES OF INCORPORATION

of

Confederate Financial Inc.

(name of corporation)

FILED  
99 AUG -9 AM 9:42  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

## ARTICLE I - CORPORATE NAME

The name of the corporation is:

Confederate Financial INC.

## 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 five million ~~500,000~~ shares (\$1.00, (w)) of one Dollar(s) (\$ 1) par value Common Stock, which shall be designated "Common Shares".

## ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	ROBERT HAUKE		
ADDRESS	715 NE 7TH AVE.		
CITY	FT. LAUDERDALE	FLORIDA	ZIP 33304

The principal office, if known, or the mailing address of the corporation is:

NAME	INTERNATIONAL CREDIT BANCORP. INC.		
ADDRESS	POB 4927		
CITY	FT. LAUDERDALE	FLORIDA	ZIP 33338

# ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have 1 (ONE) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	ROBERT HAUKE		
ADDRESS	711 NE 7TH AVE		
CITY	FT. LAUDERDALE	STATE	FL ZIP 33304
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

# ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	ROBERT HAUKE		
ADDRESS	711 NE 7TH AVE		
CITY	FT. LAUDERDALE	STATE	FL ZIP 33304
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this \_\_\_\_\_ day of 8-3, 19 99.

X Robert Hauke (Seal)  
 \_\_\_\_\_ (Seal)  
 \_\_\_\_\_ (Seal)

CERTIFICATE AND KNOWLEDGEMENT  
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT  
OF

Confederate Financial INC.  
(name of corporation)

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

at 714 NE 7TH AVE  
FT. LAUDERDALE, FL 33304

has named ROBERT HAUKE  
located at the aforesaid address, as its Registered Agent to accept service of process within  
this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated  
corporation at the place designated in this certificate, and being familiar with the obliga-  
tions of that position, I hereby accept to act in this capacity, and agree to comply with the  
provisions of Florida Law in keeping open said office.

X R Hauke  
(registered agent)

SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
99 APR -9 AM 9:42

FILED