FILED

00 JAN 19 AM 9: 08

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SEGNÉTARY OF STATE TALLAHASSEE, FLORIDA

*****78.75 *****78.75

VISIMAX FINANCING, T (Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

S78.75

Filing Fee

Filing Fee

& Certificate of Status

□\$78.75

Filing Fee & Certified Copy

\$87.50

Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Michael A. Slaviv
Name (Printed or typed)

4440 BGA Blvd Ste 402

Article T

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

PH 1/26/2000/

ARTICLES OF INCORPORATION

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VISIMAX FINANCING, INC.

SEURETART OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation:
ARTICLE I. NAME
The name of this corporation is VISIMAX FINANCING, INC.
ARTICLE II. PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
4362 Northlake Blvd., Suite 213, Palm Beach Gardens, Florida 33410
ARTICLE III. SHARES
The number of shares of common stock that this corporation is authorized to have is Ten Thousand (10,000) and the number of shares of preferred stock is Ten Thousand (10,000).
ARTICLE IV. REGISTERED AGENT The name and address of the initial registered agent is:
Michael A. Slavin, Esq. 918,474 MCHALE & SLAVIN, P.A.
4440 PGA Blvd., Suite 402 Palm Beach Gardens, Florida 33410 (561) 625-6575
ARTICLE V. INCORPORATOR The name and address of the incorporator is:
Michael A. Slavin, Esq. 918,474 MCHALE & SLAVIN, P.A. 4440 PGA Blvd., Suite 402
Palm Beach Gardens, Florida 33410 (561) 625-6575

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ARTICLE VI EFFECTIVE DATE The effective date of the corporation is the date of filing. TALLAHASSEE, FLORIDA
IN WITNESS WHEREOF, the undersigned incorporator has subscribed his name this day of January 17 2000. Michael Slavin
STATE OF FLORIDATION OF THE STATE OF THE STA
COUNTY OF PALM BEACH
The foregoing instrument was acknowledged before me this \(\frac{17}{2} \) day of January 17, 2000 by Michael Slavin, who is personally known to me and who did take an oath. Notary Public, State of Florida
My Commission expires: Cathy T. Nicholson

Expires June 27, 2003

Bended Thru

Atlantic Bonding Co., Inc.

Registered Agent

ACCEPTANCE

Having been names as registered agent and to accept service of process for the above state 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 pregistered agent.

Date Michael A. Slavin