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TRANSMITTAL LETTER

FILED

00 JAN 24 AM 9: 32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

700003108557--7
-01/24/00--01117--003
*****78.75 *****78.75

SUBJECT: INFORMATION MANAGEMENT CENTERS INTERNATIONAL, INC.

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

☐ \$70.00 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee
Certified Copy
& Certificate
of Status
ADDITIONAL COPY REQUIRED

FROM: ANDREW BLANK, PRESIDENT
3455 N.W. 54 STREET
MIAMI, FLORIDA 33142
(305) 633-8587

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

pt 1/31/2000✓

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

INFORMATION MANAGEMENT CENTERS INTERNATIONAL, INC.

ARTICLE II PRINCIPAL OFFICE

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

3455 N.W. 54 STREET
MIAMI, FLORIDA 33142

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

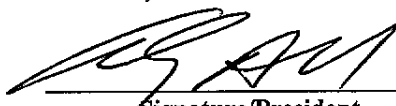
The name and Florida street address if the initial registered agent are:

SHELLEY MARCIANO
9350 SOUTH DIXIE HIGHWAY
SUITE 900
MIAMI, FLORIDA 33156

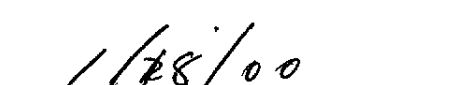
ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ANDREW BLANK, PRESIDENT
3455 N.W. 54 STREET
MIAMI, FLORIDA 33142



Signature/President

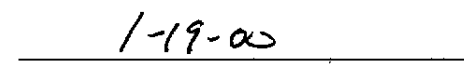


Date

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/Registered Agent



Date