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

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orinted or typed) venue, Suite G-8	<u> </u>	CRETARY OF LAHASSEE;	FED 23 FM
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(Proposed corporate name - must include suffix)

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

C.C.



ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation shall be Area Expert, IEC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business shall be 2071 S. W. 70th Avenue, Suite G8
Davie, FL 33317

and the mailing address of this corporation shall be 2071 S. W. 70th Avenue, Suite G8

Davie, FL 33317



The number of shares that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock, having a par value of \$1.00 U. S. per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is Darlene Nelson-Oliphant, C.P.A.

2071 S. W. 70th Avenue, Suite G8

Davie, FL 33317

ARTICLE V INCORPORATORS

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

Darlene Nelson-Oliphant, CPA 2071 S. W. 70th Avenue, Suite G8 Davie, FL 33317

ARTICLE VI TERM OF EXISTENCE

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida. The date on which the corporate existence shall begin is five days prior to the filing date of the incorporation.

The undersigned incorporator has executed these Articles of Incorporation this 17th day of February, 2000.

Darlene Nelson-Oliphant, CPA

FILED 2: 10 OF FEB 23 PM 2: 10

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1.	The name of the corporation is:	AREA EXPERT, INC.	
2.	The name and address of the regis	stered agent and office is:	
	Darlene Oliphan	ıt	00 F
		(NAME)	
	2071 S. W. 70th	n Avenue, Suite G-8	23 55EE
	(P.O. B	ox or Mail Drop Box NOT ACCEPTABLE	<u></u>
	Davie, FL 3331	7	2: 1 OR
		(Chty/State/Zip)	—— >m o
ce a; re	Taving been named as registered orporation at the place designated gent and agree to act in this capace lating to the proper and complete publications of my position as registe	in this certificate, I hereby accep city. I further agree to comply wi performance of my duties, and I o	t the appointment as registered th the provisions of all statutes
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DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314