# PODOOD 24bod TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 \*\*\*\*\*\*78.75 \*\*\*\*\*78.75 Tallahassee, FL 32314 FFT Funding, (Proposed corporate name - must include suffix) Enclosed is an original and one(1) copy of the articles of incorporation and a check for: **△** \$78.75 \$70.00 \$87.50 □\$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Robert M. Sriberg FROM: Name (Printed or typed)

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

12914 Touchstone Place

(561) 302-0949

Palm Beach Gardens, FL 33463

City, State & Zip

Daytime Telephone number

# **また**-3 PM 3:

### 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.

### ARTICLE I NAME

The name of the corporation shall be:

FFT Funding, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

4698A Forest Hill Boulevard West Palm Beach, FL 33415

# ARTICLE III SHARES

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

Five Hundred

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Robert M. Sriberg 12914 Touchstone Place Palm Beach Gardens, FL 33418 ARTICLE V INCORPORATOR

Signature/Incorporator

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Peter Saiger 11012 La Salinas Circle Boca Raton, FL 33428

February 29, 2000

Date

(An additional article must be added if an effective date is requested.)

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 chigations of my position as registered agent

Signature/Registered Agent

February 29, 2000

Date