Division of Corporations

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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name

: PARALEGAL SOLUTIONS FT LAUDERDALE

Account Number : I19990000257 Phone

: (954)565-9929

Fax Number

: (954)565-1347

FLORIDA PROFIT CORPORATION OR P.A.

Republic Financial Systems, Inc.

Certificate of Status	0
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PAGE 02

ARTIC	(((H00000018157 8))) LES OF INCORPORATION		
The und	lerslaned incompretor, for the aumona of Samuel		
Corpora	dersigned incorporator, for the purpose of forming a corporation under the Florida Busine ation Act, heraby adopts the following Articles of Incorporation.	9SS	
ARTIC	LE I NAME		
The nam	ne of the Corporation shall be:		0
Republ	lic Financial Systems, Inc.	8	X
ADTICI	LEU BRUSS	7	Ë
The print	LE II PRINCIPAL OFFICE	20	C
4321 N	cipal place of business and mailing address of this corporation shall be: W 59th Street	00 APR 20	<u>ر</u>
Fort Lau	uderdale, FL 33319	0	OKI
	449.46(6) 1 E 600 [9	<u> </u>	Š.
ARTICL	E III SHARES	PM 12: 1	7
The numi	per or shares that this comporation is sufficient to be the contract to		DIAISING OF PAREDVALOUS
10,000 :	shares shares		٠
ARTICL	EIV DIRECTORS		
the nume	per of directors constituting the initial board of directors is one (1), and the name and add no persons who are to serve as directors until the first annual machine of the control of th	rirae	
until their	n or persons who are to serve as directors until the first annual meeting of the sharehold successors are elected and qualified are:	jers	or Or
Mark An	Ithony Smith		
4321 NV	V 59 th Street		
Fort Lau	derdale, FL 33319		
ADTIOLI			
The name	EV INITIAL REGISTERED AGENT AND STREET ADDRESS		
	and Florida street address of the initial registered agent are: thony Smith		
4321 NW	V 59th Street		
	derdale, FL 33319		
	1		
ARTICLE	VI INCORPORATOR		
The name	e and address of the incorporator to the analytic		
Mark Anti	hony Smith		
4321 NW	59th Street		
Fort Laug	erdere,\FL 33318/		
M			
	19/00 4/19/00		
Sig	nature/Incorporator Date		_
Having been	named we validated and		
place design	named as registered agent and to accept service of process for the above stated corporation at the state of the service agent and agree to act in this carrier agent and agree to act in this carrier to comply with the provisions of all statutes relating to the service and agree to act in this	1e	
wipacity U	MINDI SOME MICAMBRANIAN IL		
//// hearmiti stuce (of my duties, and I amiliar with and accept the obligations of my position as egistered agent.		
/W			
Sin	24 19/00		
Cigi	hature/Registered Agent		-
1	`(((H00000018157 8)))		