P0000074518

Florida Department of State Division of Corporations

Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000041150 4)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To

Division of Corporations

Fax Number : (850) 922-4001

From

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255
Phone: (305)541-3694
Fax Number: (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

cape corporate claims & invesigations services corp

Certificate of Status	0
Certified Copy	1
Page Count	05(0)
Estimated Charge	\$78.75

SECRETARY OF STATE STATE OF CORPORATIONS

B. McKnight AUG 0 7 2000

8/4/00 2:34 PM

l of 2



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 4, 2000

EMPIRE

SUBJECT: CAPE CORPORATE CLAIMS & INVESTIGATIONS SERVICES CORPORATION

REF: W00000019430

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity must be identical throughout the document.

If you have any further questions concerning your document, please call (850) 487-6067.

Neysa Culligan Document Specialist FAX Aud. #: H00000041150 Letter Number: 200A00042402



H00000041150 ARTICLES OF INCORPORATION

FOR

CAPE CORPORATE CLAIMS & INVESTIGATIONS SERVICES CORPORATION

The undersigned, acting as incorporator(s) of a Corporation pursuant to Chapter 621 Florida Statutes, adopt(s) the following Articles of Incorporation.

ARTICLE I-NAME

The name of the Corporation shall be:

CAPE CORPORATE CLAIMS & INVESTIGATIONS SERVICES CORPORATION

ARTICLE II- PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

1601 SW 122 Ave. #1 Miami, FL 33175

ARTICLE III- CORPORATE DURATION

The duration of the Corporation is to be perpetual.

SECRETARY OF STATE

ONISION OF CORPORATIONS

OO AUG - 7 AM II: 19

This Instrument prepared by: EDUARDO CANTERA, ESQ. 1762 Coral Way Mismi, Florida 33145 FBN: # 154990 TEL: (305) 442-4343 FAX: (305) 285-2884

n00000041150

H00000041150

ARTICLE IV - PURPOSE

The Corporation may engage in any activity or business permitted under the Laws of the State of Florida.

ARTICLE-V CAPITALIZATION

The aggregate number of shares which the Corporation is authorized to issue is 100 Shares. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

ARTICLE VI- DIRECTORS

The number of Directors constituting the initial Board of Directors of the Corporation shall be three (3):

Lissette Collazo

President

Thais Buergo

Vice President

Flor Collazo

Vice President

ARTICLE VII- INCORPORATORS

The name and address of the Incorporator is:

NAME

ADDRESS

Lissette Collazo

1601 SW 122 Ave. #1 Miami, Fl. 33175

Thais Buergo

1601 SW 122 Ave. #1

Miami, FL 33175

Flor Collazo

1601 SW 122 Ave. #1 Miami, Fl. 33175

H00000041150

ARTICLE VIII NOEMNIE CATTON

This Corporation shall indemnify and may insure it's Officers and Directors to the fullest extent permitted by Law.

The Undersigned Incorporator(s) has (have) executed these Articles of Incorporation this 2^{nd} day of August 2000.

Signature of the Incorporators:

Lissette Collazo – President / Director

Thais Buergo - Vice-President / Director

Flor College - Vice/President / Director

H000000041150

H00000041150

CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provisions of sections 621, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the followings statement in designating the registered office/ registered agent, in the State of Florida.

1. The name of the corporation is:

CAPE CORPORATE CLAIMS & INVESTIGATIONS SERVICES CORPORATION

2. The name and address of the registered agent and office is:

EDUARDO CANTERA, ESQUIRE. 1762 Corel Way Miami, Florida 33145

HAVING BEEN NAMED AS REGISTERED AGENT AND 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 POSITIONS AS REGISTERED AGENT,

Signature

Date 8

HO0000041150

00 AUG -7 AMII: 19