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

	Viewpointe Pa	rtners, Inc.	3: 05 LORID
SUBJECT:	(PROPOSED CORPORAT	ΓΕ NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed is an original ar	- ad one(1) copy of the articl	करक रूक ु	453387——0 0001100023 7.50 *****87.50 check for:
\$70.00 Filing Fee		□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate
		A DDETTONAY GO	DIZ DECEMBED

FROM:			
	MASTRIANA & CHRISTIANSEN, 1500 N. FEDERAL HWY.	P.A.	· · · ·
	FT. LAUDERDALE	FL	33304
	City, State & Zip		
	Daytime Telephone number		

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

ARTICLES OF INCORPORATION \cdot

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

The name of the corporation shall be:

Viewpointe Partners, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be: c'/o Stepĥen V. Hoffman, Esq.

1500 North Federal Highway, Suite 200

Fort Lauderdale, Florida 33304

ARTICLE III SHARES

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

1,000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Stephen V. Hoffman, Esq.

Mastriana & Christiansen, P.A.

1500 North Federal Highway, Suite 200, Fort Lauderdale, FL 33304

ARTICLE V ___ INCORPORATOR

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

Mastriana & Christiansen, P.A. 1500 North Federal Highway, Suite 200

Fort Lauderdale, FL 33304

ignature/Incorporator

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

\wedge	
Having been named as registered agent and to accep	nt service of process for the above stated corporation at the place designated it
	gistered agent and agree to act in this capacity. I further agree to comply with
the provisions of pll statutes relating to the proper a	and complete performance of my duties, and I am familiar with and accept th
optigations of myposition as registered agent	1,
T X W MOVI W	11/2/00
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	$(1/\nu)U^*$

Signature/Registered Agent

Date