POOOOOII2641

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

400003485584--7 -12/05/00--01012--007 *****78.75 ******78.75

SUBJECT: Fo	RECTOSURE POU	JER - COM nte name - must include suff	Inc,						
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :									
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate						
		ADDITIONAL CO	PY REQUIRED						
FROM: VEletta MARShall Name (Printed or typed)									
7	17326 NW 61 PL Addres	ss	OO DEC						
Miami FL. 33015 City, State & Zip									
305-826-0922 SS ::									

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

Daytime Telephone number

0/12/8

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

FORECLOSURE POWER. COM Inc.

ARTICLE II PRINCIPAL OFFICE

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

17326 nw 61 PL. Miani FL. 33015 OD DEC -4 AH II: 27

SECRETARY AS SATE
TALLAHASSEE FLORIDA

ARTICLE III SHARES

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

* 500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

VEletta Marshall 17326 NW 6196. Miani Fl.

33015

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

VEletta Mars hall
17326 NW 61 PL.
Miami FL.

PRES. - SAME
- VICE PRES. - SAME
- Secretary - Same
- TREASURER - SAME

		incorporator(s) has(ha	ve) executed these Articles of Incorporation this
(An addi	itional art	icle must be added if a	n effective date is requested.)
		Cele Ha	May hall
			Signature .

Notarization is not required

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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:	Foreclosaine	POWER	o C	-0 M	1	_برن. -
2.	The name and address of the register	ered agent and office is:	-	SEC	00 DEC	M % A	• • •-
	Velet	ta Manghall (NAME)		NEW SE	1-	6 2 3 3 8	-
	17326 (P.O. Box	η () () P (ι or Mail Drop Box NOT ACCEP	TABLE)	OF STATE E. FLORIDA	AN II: 27		- :
	Min	CTTY/STATE/ZIP)	015	0 A	7		-

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 obligations of my position as registered agent.

Celeta Moushall 1/28/2007

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314