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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE

(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

400003537714--8

-01/16/01--01027--006

*****78.75 *****78.75

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. HALEAH BAIL BONDS, INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.0

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

DIVISION OF CORPORATION

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| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

Examiner's Initials

PR

ARTICLES OF INCORPORATION

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

ARTICLE I: NAME

The name of the Corporation shall be:

HIALEAH BAIL BONDS, INC.

ARTICLE II: PRINCIPAL OFFICE

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

600 PALM AVENUE, SUITE C
HIALEAH, FLORIDA 33010

ARTICLE III: SHARES

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

100 A \$1.00 EACH.

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS.

The name and address of the initial registered agent is:

MARIO CALVO
7575 SW 29TH. STREET, MIAMI, FL 33155

ARTICLE V: INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Article of Incorporators is (are).

1.- MARIO CALVO

7575 SW 29TH. STREET
MIAMI, FL 33155

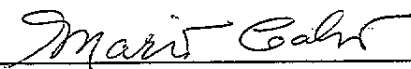
ARTICLE VI: DIRECTOR(S)

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

1.- MARIO CALVO

PRESIDENT
7575 SW 29TH. STREET
MIAMI, FL 33155

The undersigned incorporators (s) has (have) executed these Articles of Incorporation this 15TH. day of JANUARY 2001.



Signature

Signature

Signature

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501 or 617.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the State of Florida, submit the following statement designating the registered office/registered agent in the State of Florida.

1.- The name of the Corporation is : HIALEAH BAIL BONDS , INC.

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

MARIO CALVO

(Name)

7575 SW 29TH. STREET

(P.O.BOX Not Acceptable)

MIAMI, FL 33155

(City /State / Zip)

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.

SIGNATURE: Mario Calvo

DATE: JANUARY 5TH, 2001.