## TRANSMITTAL LETTER

## 7000000P80Z

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

Tallahassee, FL 32314	
SUBJECT: FEDERAL Employees (PROPOSED CORPORATION	Benefits Association of America  ENAME-MUST INCLUDE SUFFIX)  ZOCIOCI3575967-2
	-01/26/0101030003 *****87.50 *****87.50
Enclosed is an original and one(1) copy of the article	s of incorporation and a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	S78.75 Filing Fee Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: RONNIC C.	Raio rinted or typed)
2301 5. 0	OCCAN Dr. APt. 1604 Address
Holly wood	F/A. 330/9
954 - 436 Daytime	7-6962 or 1-800-255-3162 Telephone number
	SECRETAL OF AN 25 M & STANKE OF STAN

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit	ãt)	
ARTICLE I NAME  The name of the corporation shall be:  FEDECAL Employees Benefits A  OF AMERICA, Inc.  ARTICLE II PRINCIPAL OFFICE	Association	
The principal place of business/mailing address is:		
2301 S. OCEAN Dr. Apt. 1604 Holly wood Fla. 33019  ARTICLE III PURPOSE The purpose for which the corporation is organized is:	FILI 71 JAN 25 SECRETARY ALLAHASSE	
	S AM 9: 3 CONSTATE EE, ELORIDA	
ARTICLE IV SHARES  The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS DIRECTORS (op The name(s) and address(es):	<u>ptionaly</u>	
The name and Florida street address of the registered agent i	is:	-
RONNIE C. BAIO  2301 5. OCEAN Dr. APT 1604  Hollywood Fla. 33019  ARTICLE VII INCORPORATOR	<del>{</del>	
The name and address of the Incorporator is:  Ronnie C. BAIO  2301 5. OCEAN Dr. APT 1604	, ,	
(+b)(( \sqrt{3000})	**************************************	* iis
certificate, I am familiar with and accept the appointment as registered as	Date	-
Signature/Registered Agent  Jonnie C. Davo  Signature/Incorporator	1/24/01 Date	