

TRANSMITTAL LETTER
Poloooo30786

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

200003890262-1
-03/21/01--01050--010
*****78.75 *****78.75

SUBJECT: OPTIMUM FINANCIAL, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 \$78.75
Filing Fee Filing Fee
 & Certificate of Status

\$78.75 \$87.50
Filing Fee Filing Fee,
 & Certified Copy Certified Copy
 & Certificate of & Certificate of
 Status Status

ADDITIONAL COPY REQUIRED

FROM: Rose-Carolle Harding
Name (Printed or typed)

700 Layne Blvd, #118

Address

Hallandale, FL 33009

City, State & Zip

305-957-3524

Daytime Telephone number

01 MAR 21 PM 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

08/3/26

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

OPTIMUM FINANCIAL, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

700 Layne Blvd. #118 Hallandale, FL 33009

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The general nature of business of this corporation is to transact any and lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ROSE-CAROLLE HARDING 700 Layne Blvd #118, Hallandale, FL 33009
President

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

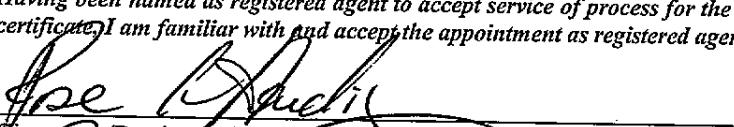
ROSE-CAROLLE HARDING
700 Layne Blvd. #118, Hallandale, FL 33009

ARTICLE VII INCORPORATOR

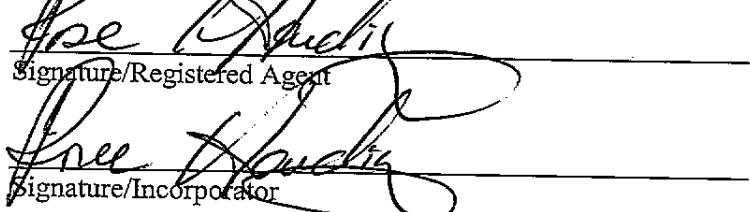
The name and address of the Incorporator is:

Rose-Carolle Harding
700 Layne Blvd, #118, Hallandale, FL 33009

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent

3/19/01
Date


Signature/Incorporator

3/19/01
Date

FILED

01 MAR 21 PM 4:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA