

PO00044617

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)

OFFICE USE ONLY

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

1. IMMIGRATION SERVICES OF AMERICA INC.
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)

RECEIVED
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 01 MAY 03 10:43
 NOT A KNOWLEDGE
 TO AGENCY OF FILING
 SUFFICIENCY OF FILING

4. _____ (Corporation Name) (Document #)

Walk Pick up time 2.00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status
 900004133839-4
 -05/03/01--01080--018
 *****78.75 *****78.75

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

FILED
 01 MAY -3 PM 2:17
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

Examiner's Initials

TRANSMITTAL LETTER

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

FILED
01 MAY - 3 PM 2:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: IMMIGRATION SERVICES OF AMERICA INC.

Enclosed is an original and one (1) copy of the ARTICLES OF INCORPORATION and a check for:

<u> </u> \$70.00	<u> X </u> \$78.75	<u> </u> \$122.50	<u> </u> \$131.2
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificates

FROM: Nelson I. Diaz
 Name (printed or typed)

 3501 SW. 107 Ave
 Address

 Miami, FL 33165
 City, State & Zip Code

 (305) 554-7724
 Daytime Telephone Number

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.

FILED
01 MAY 3 2 17 PM
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: IMMIGRATION SERVICES OF AMERICA INC.

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:

3501 SW. 107 Ave.
Miami, Fl. 33165

ARTICLE III : SHARES

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

100 Shares Common Stock, No Par Value

ARTICLE IV : INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Nelson I. Diaz
3501 SW. 107 Av
Miami, FL 33165

ARTICLE V INCORPORATOR(S)
See instructions for officers/directors

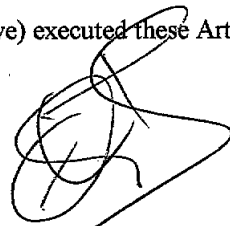
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is

River C. Linares
President, Secretary & Treasurer

3501 SW. 107 Ave
Miami, Fl. 33165

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this

2 nd . day of May, 2001



Riber C. Linares
3501 S.W. 107 Ave.
Miami, Fl 33165.

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.

The name of the corporation is : IMMIGRATION SERVICES OF AMERICA, INC.

The name and address of the registered agent and office is:

Nelson I. Diaz
(Name)

3501 SW. 107 Ave
(Address)

Miami, FL 33165
(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 positions as registered agent.



Signature

Date: 05-02-2001
01 MAY -3 PM 2:17
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SECRETARY OF STATE
TALLAHASSEE FLORIDA