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FILED

TRANSMITTAL LETTER

01 MAY 29 PM 12:34

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

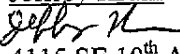
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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-05/29/01--01147--001
*****70.00 *****70.00

SUBJECT: Freedom Providers, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$70.00 Filing Fee.

Please return the photocopy to me with the filing date stamped on it.

FROM: Jeffrey Krum

4115 SE 10th Avenue

Cape Coral, FL 33904

(941) 541-7916

2✓
D. WHITE JUN - 5 2001

Articles of Incorporation

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator submits these articles of Incorporation for the purpose of forming a for-profit corporation.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The name of the corporation shall be:

Freedom Providers, Inc.

2. The principal place of business and mailing address of this corporation is:

4115 SE 10th Avenue, Cape Coral, FL 33904

3. The corporation shall have the authority to issue 50,000 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

4. The name and address of the corporation's registered agent is:

Jeffrey Krum 4115 SE 10th Avenue, Cape Coral, FL 33904

5. The initial Board of Directors shall have 2 members whose name and address are as follows:

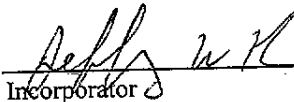
Jeffrey Krum 4115 SE 10th Avenue, Cape Coral, FL 33904
Laurie Krum 4115 SE 10th Avenue, Cape Coral, FL 33904

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The name and address of the incorporator of this corporation is:

Jeffrey Krum 4115 SE 10th Avenue, Cape Coral, FL 33904

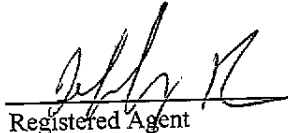
Dated 6/1/01



Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 6/1/01



Registered Agent