

001000060903

TRANSMITTAL LETTER

ORIGINAL

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

6000004423196--1  
-06/15/01--01096--020  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: TOTAL TRANSFERS, 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 Filing Fee  
☒ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: CLIVE D"ADESKY  
Name (Printed or typed)  
P.O.BOX 526751  
Address  
MIAMI, FL 33152-6751  
City, State & Zip  
305-477-6205  
Daytime Telephone number

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

D. BROWN JUN 1, 9 2001

# 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:

TOTAL TRANSFERS, INC.,

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

BUSINESS ADDRESS: 1701 NW 110 AVE, MIAMI, FL 33172

MAILING ADDRESS: P.O.BOX 526751, MIAMI FL 33152-6751

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MONEY TRANSFER

## ARTICLE IV SHARES

The number of shares of stock is:

1000 CLIVE d'ADESKY

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

PRES, VP, TREASURER+ = CLIVE D'ADESKY

8190 SW 176 ST. MIAMI, FL 33156

SECRETARY = MOHAMMAD SALEEM

8934 NW 117 TER, HIALEAH GARDENS, FL 33018

## ARTICLE VI REGISTERED AGENT

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

MOHAMMAD SALEEM

8934 NW 117 TER, HIALEAH GARDENS, FL 33018

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLIVE D'ADESKY

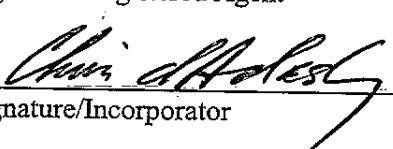
8190 SW 176 ST. MIAMI, FL 33156

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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

6/14/2001  
Date

  
Signature/Incorporator

6/14/2001  
Date

FILED

01 JUN 15 PM 12:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA