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TRANSMITTAL LETTER

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

200004565682--2
-08/31/01--01035--014
*****70.00 *****70.00

SUBJECT: NAMA FINANCIAL SERVICES, 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: HAROLD C. BENJAMIN
Name (Printed or typed)

6249 PINES BLVD
Address

PEMBROKE PINES FL 33009
City, State & Zip

954- 981- 1040
Daytime Telephone number

FILED
01 AUG 31 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

9-4-01

ARTICLES OF INCORPORATION

FILED
01 AUG 31 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

NAMA FINANCIAL SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

510 N. FEDERAL HIGHWAY
HALLANDALE, FLORIDA 33009

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ARMAN AZADI
510 N FEDERAL HIGHWAY
HALLANDALE, FL 33009

ARTICLE V INCORPORATOR

The **name and address** of the incorporator to these Articles of Incorporation are:

ARMAN AZADI
510 N FEDERAL HIGHWAY
HALLANDALE, FL 33009

8/30/01

Signature/Incorporator **Date**

(An additional article must be added if an effective date is requested.)

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 position as registered agent.

8/30/01

Signature/Registered Agent **Date**