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TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 315131 162199A

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : February 4, 2002

ORDER TIME : 10:59 AM

ORDER NO. : 315131-005

CUSTOMER NO: 162199A

CUSTOMER: Rick M. Morse, Cpa  
Rick M. Morse, Cpa, P.a.

Suite 300  
1700 University Drive  
Coral Springs, FL 33071

DOMESTIC FILING

NAME: DIVERSIFIED AMERICAN  
MANAGEMENT, INC.

EFFECTIVE DATE:

200004864092--2

XX ARTICLES OF INCORPORATION  
\_\_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP  
\_\_\_\_ ARTICLES OF ORGANIZATION

-02/04/02--01035--026  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 1156

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
02 FEB - 4 PM 12:08  
TALLAHASSEE, FLORIDA

J. BRYAN FEB 4 2002

ARTICLES OF INCORPORATION  
OF  
DIVERSIFIED AMERICAN MANAGEMENT, INC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I

NAME

The name of this Corporation shall be :

DIVERSIFIED AMERICAN MANAGEMENT, INC.

ARTICLE II

PURPOSE

This corporation is organized for the purpose of **MANAGEMENT** and transacting any and all lawful business.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 2000 shares of \$ 1 par value common stock.

ARTICLE IV

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office of this corporation is:

5150 W. COPANS ROAD, PMB1188  
MARGATE, FLORIDA 33063

and the name of the initial registered agent of this corporation at the above address is:

CARL W. MIZE

ARTICLE V

DIRECTORS

This corporation shall have one Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one. The name and address of the initial Director of this corporation is:

CARL W. MIZE  
5150 W. COPANS ROAD, PMB1188  
MARGATE, FL 33063

ARTICLE VI

INCORPORATOR

The name and address of the person signing these Articles is:

CARL W. MIZE  
5150 W. COPANS ROAD, PMB1188  
MARGATE, FL 33063

ARTICLE VII

POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

ARTICLE VIII

INDEMNIFICATION

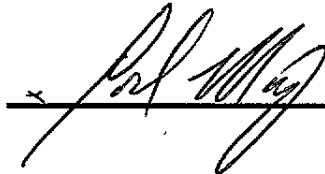
The corporation shall indemnify any officer or director or former officer or former director to the full extent permitted by law.

**ARTICLE IX**

**AMENDMENT**

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this 30<sup>th</sup> day of January 2002



CARL MIZE

STATE OF FLORIDA  
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 30<sup>th</sup> DAY of January, 2002 CARL W. MIZE appeared before me the undersigned authority, to me well known and known to me to be the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he executed the same, freely and voluntarily for the purpose therein expressed.



Notary Public

ss: My Commission Expires:



Rick M. Morse  
Commission # CC 971558  
Expires Nov. 8, 2004  
Bonded Thru  
Atlantic Bonding Co., Inc.


CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED;

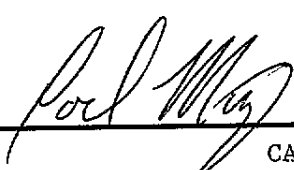
**DIVERSIFIED AMERICAN MANAGEMENT, INC.**

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.

WITH ITS PRINCIPAL PLACE OF BUSINESS AT CITY OF **MARGATE, FLORIDA** HAS NAMED **CARL W. MIZE** LOCATED AT **5150 W. COPANS ROAD, PMB1188, MARGATE, FLORIDA 33063** IS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE x  CORPORATE OFFICER CARL MIZE  
TITLE x PRESIDENT  
DATE x 1-30-02

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE x  CARL W. MIZE  
DATE x 1-30-02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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