Department of State

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 100004865591

| -02/05/02-=01013 | 3003 - |
|--|----------|
| *****78.75 *** | ***78.75 |
| Enclosed in an artistrative to the contract of | |
| 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 | □\$122.50 Filing Fee & Certified Copy | \$131.25 Filing Fee, Certified Copy & Certificate |
|-------------------------|----------------------------------|---------------------------------------|---|
| | | ADDITIONAL CO | PY REQUIRED |

| FROM: | Name (Printed or typed) |
|-------|--|
| | _ Name (Printed or typed) |
| - | 1465 W- 2319 8+ Address |
| - | Riviera Beh Fl 33404 City, State & Zip |
| _ | 56/ 329 9469 56/ 632 3993 Daytime Telephone number |

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

| AR FICLES OF INCORPORATION | |
|--|------------|
| In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) | |
| | |
| The name of the corporation shall be: | |
| | |
| PAlm Beach Investigations, INC | |
| ARTICLE II PRINCIPAL OFFICE | |
| The principal place of husiness/mailing address is: | |
| 1405 W. 23 4 St Riviera Beh. FL. 33404 | |
| ARTICLE III PURPOSE | |
| The purpose for which the corporation is organized is: | |
| Talifaction of the same of the | |
| ARTICLE IV SHARES "Process service | |
| ARTICLE IV SHARES PROCESS SERVICE | |
| THE HUHIDER OF Shares of stock is: | |
| 1000 Shares Par Value 41.00 | |
| ARTICLE V INITIAL OFFICERS DIRECTORS | |
| The name(s) and address(es): | - |
| Mysses Hubbard - Prindent 1405 W-23 9 St Diviewa BOLFE 33404 | |
| AKTICLE VI REGISTERED ACENT | |
| The name and Florida street address registered agent are: | |
| 11455es Hubbards St. Riviera Boh FL 33404 | |
| 1405 Wilson St. 12, Viera 18ch to 5,207 | |
| ARTICLE VII INCORPORATOR | |
| The name and address of the Incorporator are: | - |
| Ullysses Hubbard 1405 W. 23 Vol 54 | |
| Diviesa Beh FL 33404 | |
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | |
| The state of the s | |
| his 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 bligations of my position as registered agent. | |
| | |
| Signature/Registered Agent | |
| Date | |
| Signature/Incorporator | - - |
| Date Date | |
| | |