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TRANSMITTAL LETTER

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

0000056101 00--9
-05/24/02--01041--008
*****78.75 *****78.75

SUBJECT: GARDA INSURANCE SERVICES, INC.

(PROPOSED CORPORATE NAME - <u>MUST INCLUDE SUFFIX</u>)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for $78.75 for the
Filing Fee & Certified Copy.

FROM: _____John D. Machul_____

Name (Printed or typed)

_____3370 NE 190th ST. #2114_____

Address

_____AVENTURA, FL 33180_____

City, State & Zip

_____305-940-2992_____

Daytime Telephone Number

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit), the undersigned incorporator hereby adopts the following Articles of Incorporation.

ARTICLE I – NAME

Garda Insurance Services, Inc.

ARTICLE II – PRINCIPAL OFFICE
3370 NE 190th Street #2114
Aventura, FL 33180

ARTICLE III -PURPOSE
The purpose for which the corporation is organized is to engage in any lawful business under Florida law.

ARTICLE IV – SHARES
The number of shares is 1000 authorized shares of common stock at one dollar ($1.00) par value.

ARTICLE V – INITIAL OFFICERS/DIRECTORS (optional)
None at the present time.

ARTICLE VI – REGISTERED AGENT
John D. Machul
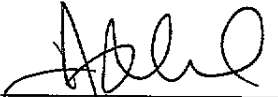3370 NE 190th Street #2114
Aventura, FL 33180
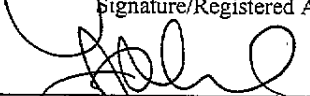
ARTICLE VII – INCORPORATER
John D. Machul
3370 NE 190th Street #2114
Aventura, FL 33180

ARTICLE VIII – EFFECTIVE DATE
This corporation shall have a perpetual existence with an effective date of five (5) business days prior to the date of receipt of these Articles of Incorporation by the Florida Department of State.

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

5-23-02
.Date

_____
Signature/Incorporator

5-23-02
Date