

P 0 2 0 0 0 / 0 5 7 7 5

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000206126 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

02 OCT - 1 AM 7:48

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

american claims, inc.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

F. O. HESSEN OCT 2

1402000206126

ARTICLES OF INCORPORATION

OF

AMERICAN CLAIMS, INC.

The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be:

American Claims, Inc.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation: 4444 Inverrary Blvd.,
Lauderhill, FL 33319.

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue are 1,000 shares common stock having \$ 5.00 par value.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

1402000206126

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 OCT - 1 AM 7:48

ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be: Norman A. Lobban, 5546 W. Oakland Park Blvd., Suite 207, Lauderhill, FL 33313.

ARTICLE VII

The name and address of the officers and initial board of directors shall be:

Carl Green
P/S/T

7320 NW 44th Court, Lauderhill, FL 33319

ARTICLE VIII

The name and address of the incorporator executing these Articles of Incorporation is:

Empire Corporate Kit of America, Inc.
2444 N.W. 7TH PLACE
MIAMI, FL 33127

The undersigned has executed these Articles of Incorporation this 01st day of October, 2002.


INCORPORATOR

Ray Stormont Signing for
Empire Corporate Kit of America, Inc.

H02000206126

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

First that American Claims, Inc.
 (Name of Corporation)
 desiring to organize under the laws of the State of Florida
 (Florida)
 with its principal office, as indicated in the articles of incorporation has
 named Norman A. Lobban
 (Name of Registered Agent)
 located at 5546 W. Oakland Park Blvd., Suite 207,
 City of Lauderhill County of Broward State of Florida, as its
 agent to accept service of process within this state.

02 OCT - 1 AM 7:48

 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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.

SIGNATURE


 Registered Agent

H02000206126