?02000/106207

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

INC.

SERVICES

TNTernational Benefits
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$87.50 □ \$78.75 \$70.00 \$78.75 Filing Fee Filing Fee Filing Fee. Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Lori 5miTh
Name (Printed or typed) 351 SE 9Th CT Pom Pano Bch Fl. 33060
City. State & Zip 954 227 - 7475 - noanswer 10/2/022:09

Daytime Telephone number

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

W0228628

	pre 31
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE I NAME The name of the corporation shall be:	02 SEP 30 PM 2: 27
ANTernational Benefits	Services
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P.O. BOX 25723 TAMARAC, FL 3332-0 ARTICLE III PURPOSE	J.C.
The purpose for which the corporation is organized is:	- '
Wholesale Distribution	consultants
ARTICLE IV SHARES The number of shares of stock is: 1005hqv45	-
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s), address(es) and title(s):	
Lovi SmiTh	
351 SE 9TH CT	
Pompano Bun Fl. 33060	
President	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
Lori Smith	
351 SE 9TH CT	
Pompano Bun F1 33060	
ARTICLE VII INCORPORATOR	·
The <u>name and address</u> of the Incorporator is:	
Lori Smith 351 SE 9Th CT	
Pompano Bch F1, 33060	·*********
Having been named as registered agent to accept service of process for the above stated corp certificate flam familiar with and accept the appointment as registered agent and agree to ac	oration at the place designated in this
Signatura Perintanda	9/25/02
Signature/Registered Agent	Date