

Florida Department of State Division of Corporations Public Access System

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

From:

Account Name	;	FAS-T CORP. AGENTS,	INC.
Account Number	:	071001002335	
Phone	:	(305)599-0839	
Fax Number	;	(305)716-0346	

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FLORIDA PROFIT CORPORATION OR P.A.

VERIFICATION GROUP INC.

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ARTICLES OF INCORPORATION OF VERIFICATION GROUP INC.

The undersigned incorporator for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of this corporation is VERIFICATION GROUP INC.

ARTICLE II PRINCIPAL OFFICE

The principal mailing address of this corporation shall be:

3 Grove Isle Dr No. 408 Miami, FL 33133

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HASSEE, FLORIDA

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1500 shares of \$1.00 per value common stock

ARTICLE IV INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director initially. The number of directors may be increased or diminished from time to time in accordance with by-laws adopted by the stockholders. The names and addresses of the initial board of directors are:

NAME

ADDRESS

Luis Miguel Romero. 3 Grove Isle Dr No. 408 President, Secretary Miami, FL 33133

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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Luis Miguel Romero 3 Grove Isle Dr No. 408 Miami, FL 33133

ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Luis Miguel Romero 3 Grove Isle Dr No. 408 Miami, FL 33133

Mis Miguel Romero

March 4th 2003 _____ Date

ACKNOWLEDGMENT:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this cartificate. I hereby accept the appointment as registered agent and agree to act in this depacity. 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.

Luis Miguel Romero

FILED 03 MAR -4 AM 8: 56 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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