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DIVISION OF CONTURATION

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EXPRESS CORPORATE FILING SERVICE INC. Requestor's Name

1000 PONCE DE LEON BLVD. SUITE:101 Address

CORAL GABLES, FL 33134 City/State/Zip

(305) 444-4994

Phone #

OFFICE USE ONLY

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

	DO COLLEGE (& LICE) LES MANONANTE	
UNITED FINAN	ICIAL NETWORK INC.	
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(Corporation Name)	(Document #)	
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(Corporation Name)	(Document #)	
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NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
OTHER FILNGS	REGISTRATION/	
Annual Report	QUALIFICATION	
Fictitious Name	Foreign	
Name Reservation	Limited Partnership	
<u></u>	Reinstatement	
	Trademark	

Other

ARTICLES OF INCORPORATION FOR

UNITED FINANCIAL NETWORK 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 the corporation shall be:

UNITED FINANCIAL NETWORK INC.

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TALL ARTS SHE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

P.O. BOX 562592 MIAMI, FL 33256

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

100

ARTICLE IV REGISTERED AGENT

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

IVETTE AMADOR 7900 S.W. 122ND STREET MIAMI, FL 33156

ARTICLE V INCORPORATOR

The name and address of the incorporator(s) to these Articles of Incorporation shall be:

IVETTE AMADOR P.O. BOX 562592 MIAMI, FL 33256

Signature of Incorporator

5 | 5 | 03 Date

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ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the Director(s)/Officer(s) shall be:

IVETTE AMADOR (P) P.O. BOX 562592 MIAMI, FL 33256

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the articles, 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

Date