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FLORIDA PROFIT CORPORATION OR P.A.

claims corner, inc

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 19, 2004

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SUBJECT: CLAIMS CORNER, INC.

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Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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ARTICLES OF INCORPORATION

<u>OF</u>

CLAIMS CORNER, INC

The undersigned incorporation(s), for the purpose of forming a corporation Under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

CLAIMS CORNER, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1346 NW 4TH STREET **BOCA RATON, FL 33486**

ARTICLE III CAPITAL STOCK

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

1,000 shares @ 1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

ROBIN M. STOKES 1346 NW 4TH STREET BOCA RATON, FL 33486

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ARTICLE V - INCORPORATOR (S)

The name(s) and street address (es) of the incorporator(s) to these Articles of Incorporation is (are):

ROBIN M. STOKES 1346 NW 4TH STREET BOCA RATON, FL 33486

ARTICLE VI AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE VII - BY LAWS

The power to adopt, alter, amend or repeal By-laws shall be vested in the Board of Directors and shareholders.

ARTICLE VII - BY LAWS

The undersigned has (have) executed these Articles of Incorporation this I Thirteenth day of April 2004.

ignature/Title

-Signature/Title

Signature/Title

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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.

The name of the corporation is: CLAIMS CORNER, INC

1.

The name and address of the registered agent and office:
ROBIN M. STOKES
1346 NW 4TH STREET
BOCA RATON, FL 33486

SIGNATURE

Corporation Officer

TITTE

DATE ~

Having been named as Registered Agent and to accept service of process for the above stated corporation at the place designed 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 provision 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

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