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TRANSMITTAL LETTER

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

SUBJECT: Isavedit	com Inc. (PROPOSED CORPORA	ATE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an origi	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	rry P Bonhomme	e (Printed or typed)	
	Nam 432 NE 72nd Street	e (Finned of Lyped)	_
-		Address	
	Miami,FI 33138 City	, State & Zip	

786-356-3274

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

Daytime Telephone number

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Isavedit.com Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 432 NE 72ND STREET MIAMI.FL 33138

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: BANKING AND FINACIAL PURPOSES

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): JERRY P BONHOMME, PRESIDENT

JUAN C RAMIREZ, CEO

REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JUAN C RAMIREZ 2829 INDIAN CREEK DRIVE, APT.801 MIAMI BEACH,FL 33140

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

JERRY P BONHOMME 432 NE 72ND STREET MIAMI,FL 33138

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am fashiliar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

ignature/Incorporator

6-17-04 Date 06/17/04