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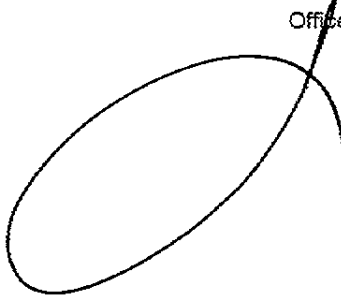
(Business Entity Name)

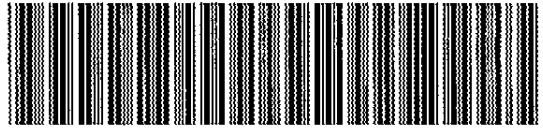
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04 JUN 25 PM 2:03 2004 JUN 28 P 1:39
FLORIDA SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA


**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box J7866 (32315-7866) (850) 222-2666 or (800) 969-1666 . Fax (850) 222 1666

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Arts

1.) Hurricane Marketing Solutions, Inc
(CORPORATE NAME & DOCUMENT #)

2.)
(CORPORATE NAME & DOCUMENT #)

3.)
(CORPORATE NAME & DOCUMENT #)

4.)
(CORPORATE NAME & DOCUMENT #)

5.)
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 25, 2004

CORPORATE ACCESS, INC.

SUBJECT: HURRICANE MARKETING SOLUTIONS, INC.
Ref. Number: W04000024598

We have received your document for HURRICANE MARKETING SOLUTIONS, INC.. However, the document has not been filed and is being returned for the following:

The name of the entity must be identical throughout the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Document Specialist
New Filings Section

Letter Number: 304A00042014

Corrected 6/28
Thanks!
Irish (with a circled 'i')

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04 JUN 28 AM 11:09
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
HURRICANE MARKETING SOLUTIONS, INC.**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I

CORPORATE NAME

The name of the corporation shall be: **HURRICANE MARKETING SOLUTIONS, INC.**

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 500 West Cypress Creek Court, Suite 440, Ft. Lauderdale, Florida 33309.

ARTICLE III

SHARES

The number of shares of stock that this corporation is authorized to have, outstanding at any one time are: 1000 shares with no par value.

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: George Bosire, and the mailing address of its initial agent is: 500 West Cypress Creek Court, Suite 440, Ft. Lauderdale, Florida 33309.

ARTICLE V

INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are): Barbara Pizzo, 701 Renner Road, Wilmington, Delaware 19810.

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ARTICLE VI

DURATION

The duration of the corporation shall be perpetual.

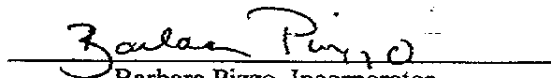
ARTICLE VII

BOARD OF DIRECTORS

The number of directors constituting the initial board of directors of the corporation is one (1).

The name and address of the person who is to serve as member of the initial board of directors the corporation is of as follows: George Bosire, 500 West Cypress Creek Court, Suite 440, Ft. Lauderdale, Florida 33309.

The undersigned incorporator has executed these Articles of Incorporation twenty-first day of June 2004.


Barbara Pizzo, Incorporator
Corporate Consulting Ltd.

**CERTIFICATE OF DESIGNATION OF
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.

1. The name of the Corporation is: HURRICANE MARKETING SOLUTIONS, INC.
2. The name and address of the registered agent and office is:

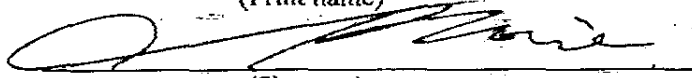
GEORGE BOSIRE
(Name)

500 WEST CYPRESS CREEK COURT, Suite 440,
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

FT. LAUDERDALE, FLORIDA 33309
(City/State/Zip)

Having been named as registered agent to accept service of process for the above stated corporation at the place designated 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 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.

GEORGE BOSIRE
(Print name)


(Signature)

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