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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

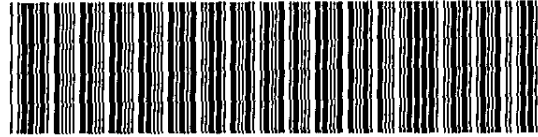
(Business Entity Name)

(Document Number)

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2004 NOV 16 P 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Smart Money Investors, Inc.

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

- ☒ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- ☒ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

**ARTICLES OF INCORPORATION
OF
SMART MONEY INVESTORS, INC.**

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TALLAHASSEE, FLORIDA

**THE UNDERSIGNED SUBSCRIBER (s) TO THESE ARTICLES OF INCORPORATION,
NATURAL PERSON (s) COMPETENT TO CONTRACT, HEREBY FORM A CORPORATION UNDER
THE LAWS OF THE STATE OF FLORIDA.**

ARTICLE I - CORPORATE NAME

**THE NAME OF THE CORPORATE IS SMART MONEY INVESTORS, INC.
THE PRINCIPLE MAILING ADDRESS OF CORPORATION IS : 5192 NW 74th COURT COCONUT CREEK , FL 33073**

ARTICLE II - DURATION

**THIS CORPORATION SHALL EXIST PERPETUALLY UNLESS DISSOLVED
ACCORDING TO FLORIDA LAW.**

ARTICLE III -PURPOSE

**THE CORPORATION IS ORGANIZED FOR THE PURPOSE OF ENGAGING IN ANY
ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE
STATE OF FLORIDA.**

ARTICLE IV- CAPITAL STOCK

**THE CORPORTATION IS AUTHORIZED TO ISSUE (five hundred) SHARES
(500) OF (one) DOLLAR (s) (\$ 1.00) PAR VALUE COMMON STOCK, WHICH SHALL
BE DESIGNATED "COMMON STOCK"**

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

THE NAME AND ADDRESS OR THE INITIAL REGISTERED AGENT OF THIS CORPORATION IS:
NAME: CHRISTINE J INGRAHAM

PRINCIPLE AND MAILING ADDRESS : 5192 NW 74th COURT

CITY: COCONUT CREEK, FLORIDA ZIP 33073

ARTICLE VI- INITIAL BOARD OF DIRECTORS

THIS CORPORATION SHALL HAVE ONE (1)
DIRECTORS INITIALLY. THE NUMBER OF DIRECTORS MAY BE INCREASED OR
DIMINISHED FROM TIME TO TIME BY THE BY-LAWS, BUT SHALL NEVER BE LESS THAN ONE (1).
THE NAMES AND ADDRESS OF THE INITIAL DIRECTOR(S) OF THE
CORPORATION ARE AS FOLLOWS:

NAME: CHRISTINE J INGRAHAM

NAME:

PRINCIPLE AND MAILING ADDRESS : 5192 NW 74th COURT

CITY: COCONUT CREEK FLORIDA ZIP 33073

NAME: VICTOR TOVAR

NAME:

PRINCIPLE AND MAILING ADDRESS: 5192 NW 74th COURT

CITY: COCONUT CREEK, FLORIDA ZIP 33073

ARTICLE VII - INCORPORATORS

THE NAME AND ADDRESSES OF THE PERSON(S) SIGNING THESE ARTICLES OF
INCORPORATION ARE AS FOLLOWS:

NAME: CHRISTINE J INGRAHAM

NAME:

PRINCIPLE AND MAILING ADDRESS: 5192 NW 74th COURT

CITY: COCONUT CREEK FLORIDA ZIP 33073

NAME: VICTOR TOVAR

NAME:

PRINCIPLE AND MAILING ADDRESS: 5192 NW 74th COURT

CITY: COCONUT CREEK FLORIDA ZIP 33073

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF SMART MONEY INVESTORS, INC.

(Name of corporation)

**PURSUANT TO FLORIDA STATUTE SECTIONS 46.091 AND 607.304, THE FOLLOWING
SUBMITTED:**

**THE ABOVE CORPORATION, DESIRING TO ORGANIZE UNDER THE LAWS OF THE
STATE OF FLORIDA WITH ITS REGISTERED OFFICE AS INDICATED IN THE ARTICLES OF INCORPORATION**

**AT: 5192 NW 74th COURT
COCONUT CREEK, FLORIDA 33073**

HAS NAMED: CHRISTINE J INGRAHAM

**LOCATED AT THE AFORESAID ADDRESS, AS ITS REGISTERED AGENT TO ACCEPT
SERVICE OF PROCESS WITHIN THIS STATE.**

ACKNOWLEDGEMENT

**HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED
CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY
ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISIONS
OF FLORIDA LAW IN KEEPING OPEN SAID OFFICE.
I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS
A REGISTERED AGENT.**



CHRISTINE J INGRAHAM

(Registered agent)

IN WITNESS WHEREOF, THE UNDERSIGNED SUBSCRIBER (S) HAVE EXECUTED THESE
ARTICLES OF INCORPORATION THIS 1st DAY OF NOVEMBER 2004

Christine J. Ingraham (SIGN)

(SIGN)

(SIGN)

(SIGN)

STATE OF FLORIDA

SS

COUNTY OF BROWARD

BEFORE ME, A NOTARY PUBLIC AUTHORIZED TO TAKE ACKNOWLEDGEMENTS IN THE
STATE AND COUNTY SET FORTH ABOVE PERSONALLY APPEARED

NAME: CHRISTINE J INGRAHAM

KNOWN TO ME AND KNOWN TO BE THE PERSON (S) WHO EXECUTED THE FOREGOING
ARTICLES OF INCORPORATION, AND WHO ACKNOWLEDGE BEFORE ME THAT
(HE) OR (SHE)
EXECUTED THESE ARTICLES OF INCORPORATION

IN WITNESS WHEREOF, I HAVE HEREUNTO AFFIXED MY HAND AND SEAL, IN THE
STATE AND COUNTY AFORESAID THIS 1st DAY OF NOVEMBER, 2004

(NOTARY SEAL) Linda L. Wilson



Linda L. Wilson
MY COMMISSION # CC987703 EXPIRES
December 17, 2004
BONDED THRU TROY FAIR INSURANCE, INC.

FILED
2004 NOV 16 P 12:2
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

(NOTARY PUBLIC, STATE OF FLORIDA AT LARGE)

LINDA L. WILSON
MY COMMISSION # CC987703
MY COMMISSION EXPIRES: DECEMBER 17, 2004