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TRANSMITTAL LETTER

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

SUBJECT: Stempio	en Financial Corp. (PROPOSED CORPORA	ATE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	i 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 PY REQUIRED
FROM: Da	n E. Stempien		
	Name	e (Printed or typed)	
	10843 Cypress Glen Drive	Address	
	Coral Springs , Florida		·
	City	, State & Zip	
	(954) 579-6385 Daytime	Telephone number	

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

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:

Stempien Financial Corp.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 10843 Cypress Glen Drive Coral Springs, Florida 33071

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: Finance

ARTICLE IV SHARES

The number of shares of stock is: 100

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Dan E. Stempien

10843 Cypress 6/en Drive

Coral Springs.

REGISTERED AGENT

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

Dan E. Stempien 10843 Cypress Glen Drive Coral Springs, Florida 33071

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dan E. Stempien 10843 Cypress Glen Drive Coral Springs, Florida 33071

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 familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

12/s1/04 Date 12/s1/04