

PO5000082625

(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

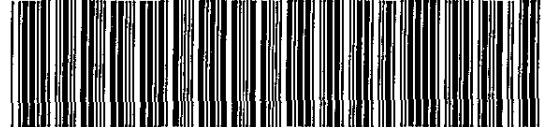
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06/02/05--01023--016 **78.75

05 JUN -8 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

6/8/05
DWK
WDS-27467

May, 2005

Florida Department of State
Division of Comm. Recording
P.O. Box 6327
Tallahassee, Fl 32314

Re: U.S.A. Pro Statisticians, Inc.

Dear Sir/Madam:

Enclosed please find original and one copy of Articles of Incorporation to be filed on behalf of the above corporation.

Kindly return a certified copy to my office.

A check in the amount of \$78.75, made payable to the Florida Department of State, is enclosed to cover costs.

If anything further is needed, do not hesitate to contact my office.

Sincerely,



Lilia Borges-Monge
P.O. Box 721115
Orlando, Fl 32872



RECEIVED

FLORIDA DEPARTMENT OF STATE JUN -6 AM 10:35

Glenda E. Hood
Secretary of State

DEPARTMENT
DIVISION OF C.
TALLAHASSEE

June 2, 2005

LILIA BORGES-MONGE
P.O. BOX 721115
ORLANDO, FL 32872

SUBJECT: U.S.A. PRO STATISTICIANS, INC.
Ref. Number: W05000027467

We have received your document for U.S.A. PRO STATISTICIANS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as incorporator in the document and the person signing as incorporator must be the same.

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.

corrected

If you have any questions concerning the filing of your document, please call (850) 245-6840.

Bruce W Kitchens
Document Specialist
New Filings Section

Letter Number: 805A00039214

ARTICLES OF INCORPORATION
OF
U.S.A. PRO STATISTICIANS, INC.

FILED

05 JUN -8 PM 1:34

The undersigned, for the purpose of forming a corporation under the STATE
Florida Business Corporation Act, hereby adopts the following articles of FLORIDA
incorporation:

ARTICLE ONE
NAME

The name of the corporation is U.S.A. PRO STATISTICIANS, INC.

ARTICLE TWO
DURATION

The term of duration of the corporation is perpetual.

ARTICLE THREE
PURPOSE

The purpose or purposes for which the corporation is organized is to
engage in any activity or business permitted under the laws of the United States
and of this state.

ARTICLE FOUR
STOCK

The aggregate number of shares which the corporation has authority to
issue is 1000, all of which shall be common shares with a par value of \$1.00.

ARTICLE FIVE
REGISTERED OFFICE

The street address of the initial registered office of the corporation is
1401 Newbridge Lane, Orlando, Fl 32825, and the name of the initial registered
agent at such address is Lilia Borges-Monge.

ARTICLE SIX
PRINCIPAL OFFICE

The street address of the principal office is 1401 Newbridge Lane,
Orlando, Fl 32825, and the mailing address of the corporation is P.O. Box
721115, Orlando, Fl 32872.

ARTICLE SEVEN
DIRECTORS

The board of directors of the corporation shall consist of one (1) member
and may be changed from time to time in accordance with the By-laws of the
corporation. The initial Board of Directors shall consist of Lilia Borges-
Monge.

ARTICLE EIGHT
INCORPORATORS

The name and address of the incorporator is Lilia Borges-Monge, P. O. Box 721115, Orlando, Florida 32872.

ARTICLE NINE
INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE TEN
COMMENCEMENT OF EXISTENCE

The corporation shall be deemed to commence its existence on the date of the filing of these Articles of Incorporation.

The undersigned has executed these Articles of Incorporation this 31 day of May, 2005.

Lilia Borges-Monge
LILIA BORGES-MONGE
INCORPORATOR

STATE OF FLORIDA
COUNTY OF *Orange*

June The foregoing instrument was acknowledged before me this 6th day of ~~May~~, 2005, by LILIA BORGES-MONGE, who is personally known to me or who has produced a Florida Drivers license as identification.

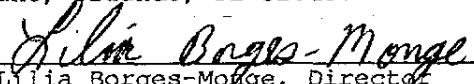
(Seal)



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 the Florida, submits the following statement in designating the registered office/registered agent in the State of Florida.

1. The name of the corporation is U.S.A. PRO STATISTICIANS, INC.
2. The name and address of the registered agent and office is Lilia Borges-Monge, 1401 Newbridge Lane, Orlando, Fl 32825.


Lilia Borges-Monge, Director
Date: May , 2005

ACCEPTANCE

Having been named as registered agent and to accept service of process for the above named corporation, at the place designated in this Certificate, I hereby 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.

DATED this 6 day of ~~May~~^{June}, 2005.


Lilia Borges-Monge
Registered Agent