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(Re	equestor's Name)			
(Address)				
(Ad	idress)			
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL		
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2005 JUN 24 AM 8: 0

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TRANSMITTAL LETTER

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

SUBJECT: AMBer	nefit Services, Inc.		
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (I) copy of the artic	les of incorporation and	a check for
Disclosed are an orig		les of incorporation and	a check for.
\$70.00	□ \$78.75	2 \$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
•	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
		1	Status
		ADDITIONAL CO	PY REQUIRED
EROM: AM	Benefit Services, Inc.		
Name (Printed or typed)			
		,	
	3435 10th Street North, Suite 302		
,		ddress	
	Naples, FL 34103		
		State & Zip	
	3,		
	(239) 659-4467		
	· · · · · · · · · · · · · · · · · · ·	elephone 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)

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ARTICLE I NAME

The name of the corporation shall be:

AMBenefit Services, Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3435 10th Street North, Suite 302, Naples, FL 34103

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, territory or nation.

ARTICLE IV SHARES

The number of shares of stock is:

7,500 shares of Internal Revenue Code Section 1244 common stock.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Steven A. Arco, President - 6537 Autumn Woods Bivd., Naples, Ft. 34109
Robert M. Morris, Treasurer - 6017 Pine Ridge Road, #256, Naples, Ft. 34119
Sheri Barnett, Secretary - 1160 27th Street S.W., Naples, Ft. 34117

ARTICLE VI REGISTERED AGENT

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

Steven A. Arco - 6537 Autumn Woods Blvd., Naples, FL 34109

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Steven A. Arco - 6537 Autumn Woods Blvd., Naples, FL 34109

Signature/Incorporator

Date