P07000049990

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name) (Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: Ryan Lucia Carabally AUTHORIZATION BY PHONE TO CORRECT I Lucie TV DATE 4/35/07 DOG EXAM INC.				





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COVER LETTER

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

SUBJECT:	ADVANTAGE CLA (PROPOSED CORPORAT	TIMS CONSULT	ANTS TWC.	
	(FROT GSEE COM ONA)	MODI ALTON	<u>COMPOLENT</u>)	
Enclosed are an ori	ginal and one (1) copy of the artic	cles of incorporation and	i a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
	Burger of the explosion	ADDITIONAL CO	DPY REQUIRED	
FROM: RYAN F. GARCIA - CARABALLO Name (Printed or typed)				
	5431 NU113 PL	Address		
	DORAL, FLOREDA City,	<i>33178</i> State & Zip		
	305 - 718-949. Daytime To	3 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)

ARTICLE I NAME

The name of the corporation shall be:

ADVANTAGE CLAIMS CONSULTANTS INC.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5431 NU 113 PL

DOCAL FLOREDA 53178

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PUBLIC ADJUSTER - INSUPANCE CLAIMS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BYAN R. GARCIA-CARABALLO, PRESEDENT

ARTICLE VI REGISTERED AGENT

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

RYAN R. (TARCEA- CARABALLO 5431 NW 113 PL DORAL,FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RUAN R. GARLEA-LARABALLO SHOT 5431 NW 113 AL DORAL, FLOREDA, 33198

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

Date

4/20/0'+ Date

Date