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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : TRIAD PROFESSIONAL SERVICES, LLC

Account Number : I20020000094 : (770)777-2091 Phone Fax Number : (770)220~1943

FLORIDA PROFIT/NON PROFIT CORPORATION

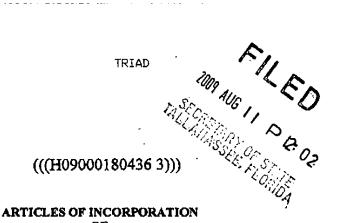
INTERSECTION, INC.

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ARTICLES OF INCORPORATION OF INTERSECTION, INC.

Pursuant to Florida Statutes Section 607.0201, the undersigned hereby submits the following Articles of Incorporation of Intersection, Inc., a corporation being organized under the laws of the State of Florida.

ARTICLE L. Name

The name of the Corporation is "Intersection, Inc." (hereinafter called the "Corporation").

ARTICLE II.

The Corporation is formed to engage in any lawful act or activity for which corporations may be organized under the Florida Business Corporation Act, Chapter 607, Florida Statutes, including any amendments thereto.

ARTICLE III. Initial Principal Office

The street address and malling address of the initial principal office of the Corporation is 6693 Collins Avenue, P.O. Box 295, Miami Beach, FL 33141.

ARTICLE IV. Capital Stock

This Corporation shall have authority to issue one thousand (1,000) shares of Common Stock having a par value of \$0.01 per share.

ARTICLE V. Initial Registered Agent

The street address of the initial registered office of the Corporation is 2731 Executive Park Drive, Suite 4, Weston, FL 33331. The name of the initial registered agent of the Corporation at that address is NRAI Services, Inc.

ARTICLE VI. Incorporator

The name and address of the sole incorporator of the Corporation is Marc Sirkin, 6693 Collins Avenue, P.O. Box 295, Miami Beach, FL 33141.

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IN WITNESS WHEREOF, the incorporator has executed these Articles of Incorporation of as of the // Eday of __August___, 2009,

MARC SIRKIN, Incorporator

REGISTERED AGENT CONSENT

Having been named as registered agent to accept service of process for the abovereferenced Corporation at the place designated herein, the undersigned confirms familiarity with and accepts the appointment as registered agent and agrees to act in this capacity.

> By:_____ Name & Title:

Date: August 11,200