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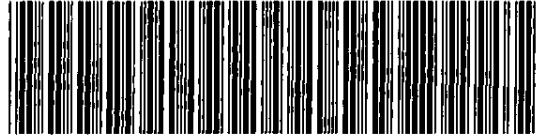
(Business Entity Name)

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DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: Integra Claims Investigative Agency Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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

ADDITIONAL COPY REQUIRED

FROM:

CLIFTON G. FINDLAY

Name (Printed or typed)

P.O. Box 246104

Address

Pembroke Pine FL 33024

City, State & Zip

(954) 868 3482

Daytime Telephone number

chico007@bellsouth.net

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 8, 2010

CLIFTON G. FINDLAY
P.O. BOX 246104
PEMBROKE PINES, FL 33024

SUBJECT: INTEGRA CLAIMS INVESTIGATIVE AGENCY INC.
Ref. Number: W10000011441

We have received your document for INTEGRA CLAIMS INVESTIGATIVE AGENCY INC. and check(s) totaling \$87.50. However, your check(s) and document are being returned for the following:

Your check should be made payable to: Florida Department of State.

Remove the percentage sign (%) from Article IV.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6921.

Maryanne Dickey
Document Specialist Supervisor
New Filing Section

Letter Number: 110A00005588

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:

INTEGRA CLAIMS INVESTIGATIVE AGENCY INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

- (1) 3600 SOUTH STATE RD. 7. STE #311 MIRAMAR, FL 33023
(2) MAILING Address: - P.O. Box 246104, Pembroke Pines FL 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PRIVATE INVESTIGATION ACTIVITIES

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):

CLIFTON G. FINDLAY - President, SECRETARY, TREASURER.
P.O. Box 246104 Pembroke Pines, FL 33024

ARTICLE VI REGISTERED AGENT

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

CLIFTON G. FINDLAY
3600 SOUTH STATE RD. 7
MIRAMAR FL. 33023

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CLIFTON G. FINDLAY
3600 SOUTH STATE RD. 7
MIRAMAR FL. 33023

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

03/03/10

Date

03/03/10

Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

10 MAR 18 AM 9:11