Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CSH SERVICES, LLC

Account Number : 120070000163

: (800)494-3124

Phone Fax Number

: (561)455-9885

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please **

Email	Address:								
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FLORIDA PROFIT/NON PROFIT CORPORATION

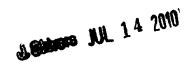
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I_NAME

The name of the corporation shall be:

PROVIDENCE FINANCIAL SERVICE SOLUTIONS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4044 W LAKE MARY BOULEVARD, STE 104-427 LAKE MARY, FLORIDA 32746

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity or business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

PRESIDENT

CHRISTIAN REESE

4044 W LAKE MARY BOULEVARD, STE 104-427

LAKE MARY, FLORIDA 32746

SECRETARY, TREASURER

MARTIN T SPANGLER

4044 W LAKE MARY BOULEVARD, STE 104-427

LAKE MARY, FLORIDA 32746

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ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

. MARTIN T SPANGLER 4044 W LAKE MARY BOULEVARD, STE 104-427 LAKE MARY, FLORIDA 32746

ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

MARTIN T SPANGLER 4044 W LAKE MARY BOULEVARD, STE 104-427 LAKE MARY, FLORIDA 32746

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.

Redistered Agent

porator

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