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TALLAHASSEE, FL 32301 (904) 681-6528

(City, State, Zip)

(Phone #)

SEPT 11 PM 2:11  
DIVISION OF CORPORATION

OFFICE USE ONLY

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95 JAN 11 PM 3:28  
TALLAHASSEE, FL  
STATE

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Dispute Resolution Associates  
(Corporation Name) (Document #)

2. \_\_\_\_\_ (Corporation Name) (Document #) 80001376348  
-01/11/95--01078--027

3. \_\_\_\_\_ (Corporation Name) (Document #) \*\*\*\*\*70.00 \*\*\*\*\*70.00

4. \_\_\_\_\_ (Corporation Name) (Document #) : H. SIMS JAN 11 1995

☒ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ ARTICLES ONLY

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

☐ ALL CHARTER DOCS

☐ CERTIFICATE OF GOOD STANDING

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

☐ Certificate of FICTITIOUS NAME

☐ FICTITIOUS NAME SEARCH

☐ CORP SEARCH

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**HOLD FOR  
PICKUP BY  
UCC SERVICES**

Examiner's Initials

ARTICLES OF INCORPORATION  
OF  
DISPUTE RESOLUTION ASSOCIATES, INC.

ARTICLE I - NAME

The name of this corporation is:  
Dispute Resolution Associates, Inc.

ARTICLE II - DURATION

The existence of this corporation shall be perpetual.

ARTICLE III - PURPOSE

This corporation is organized to own and operate a business involved the mediation and arbitration of disputes in State and Federal Courts and for the purpose of transacting any or all lawful business.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue seventy-five shares of Ten----- dollars (\$ -10.00-) par value common stock.

PRINCIPAL PLACE OF BUSINESS AND  
ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is: 10014 S. Federal Highway, Port St. Lucie, Florida 34952, and the name of the initial registered agent of this corporation at that address is: Adriano R. Gonzalez. The principal place of business of this corporation shall be: 10014 S. Federal Highway, Port St. Lucie, Florida 34952.

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CLERK OF DISTRICT COURT  
PORT ST. LUCIE, FLORIDA

ARTICLE VI - INITIAL BOARD OF DIRECTOR(S)

This corporation shall have one director(s) initially. The name and address of the initial director(s) of this corporation is (are):

Adriano R. Gonzalez  
10014 S. Federal Highway  
Port St. Lucie, Florida 34952

ARTICLE VII - INCORPORATOR(S)

The name and address of the person(s) signing these articles is (are):

Adriano R. Gonzalez  
10014 S. Federal Highway  
Port St. Lucie, Florida 34952  
(Subscriber to 100% of the  
Corporate shares)

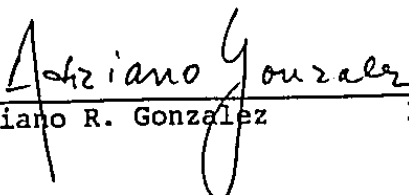
ARTICLE VIII - OFFICER (S)

The name and address of the initial officer(s) of this corporation is (are):

Adriano R. Gonzalez  
10014 S. Federal Highway  
Port St. Lucie, Florida 34952  
President, Secretary, Treasurer

ARTICLE IX - SIGNATURES

Executed by the undersigned on this 10th day of January, 1995.

  
\_\_\_\_\_  
Adriano R. Gonzalez INCORPORATOR

RESIDENT AGENT ACCEPTANCE

Having been named to accept service of process for the above stated corporation at the place designated herein, I heroby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Adriano Gonzalez  
Adriano R. Gonzalez/RESIDENT AGENT  
Date: January 10th, 1995

STATE OF FLORIDA )  
COUNTY OF ST. LUCIE )

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CLERK OF STATE  
TREASURY, FLORIDA

BEFORE ME, an Officer duly authorized to take oath in the State of Florida, personally appeared Adriano R. Gonzalez the above-named subscriber and/or resident agent of the corporation who after being duly sworn, have signed this document in my presence, is 10th day of January, 1995.

Andrea Sepeasy  
NOTARY PUBLIC, STATE OF FLORIDA

PRODUCED I.D.: \_\_\_\_\_  
PERSONALLY KNOWN: X



ANDREA SEPESSY  
My Commission CC427237  
Expires Dec. 18, 1998  
Bonded by HAI  
800-422-1866

Name/Identification:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_