

# CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME  
 FIRM  
 ADDRESS

PHONE ( )

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

*Back Alias* GAVE

AUTHORIZATION BY PHONE TO

*NAME*  
*1/31/95*

DOC. EXAM *BSB*

*Five V, Inc.*

JAN 31 1995 BSB

REQUEST TAKEN CONFIRMED APPROVED

DATE \_\_\_\_\_

TIME \_\_\_\_\_ CK No. \_\_\_\_\_

BY *AAK*

WALK-IN Will Pick Up *1-31-95*

RE: *Five V, Inc.*

C. FE DISBURSED  
 Capital Express  
 Am. Gen. Serv.  
 Corp. Record Search  
 Ind. Partnership Info  
 Foreign Corp. Fil  
 ( ) Cert. Copy(s)

100001393751  
 -01/31/95--U1042--002  
 \*\*\*\*122.50 \*\*\*122.50

Art. of Amend. Filo  
 Dissolution/Withdrawal  
 C U S-  
 Fictitious Name Filo

Name Reservation  
 Annual Report/Reinstatement  
 Reg. Agent Service  
 Document Filing

Corporate Kit  
 Vehicle Search  
 Driving Record  
 Document Retrieval

UCC 1 or 3 File  
 UCC 11 Search  
 UCC 11 Retrieval  
 File No.'s, Copies

Courier Service  
 Shipping/Handling  
 Phone ( )  
 Top Priority  
 Express Mail Prep.  
 FAX ( ) pgs.

SUBTOTALS

FEE.....  
 DISBURSED.....  
 SURCHARGE.....  
 TAX on corporate supplies.....  
 SUBTOTAL.....  
 PREPAID.....  
 BALANCE DUE.....

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

**ARTICLES OF INCORPORATION**

OF

FIVO  
~~FIVE~~ V, INC.

FILED  
95 JAN 31 AM 11:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I: NAME**

The name of the corporation shall be <sup>FIVO</sup>~~FIVE~~ V, INC.

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be 848 Brickell Ave., Suite 200, Miami, FL 33131.

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (100) shares having a par value of no par per share.

**ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is  
Arthur J. Berk, 848 Brickell Ave., Suite 200, Miami, FL 33131.

**ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles  
of Incorporation is Capital Connection, Inc., 417 E.  
Virginia St., Suite 1, Tallahassee, FL 32301.

**ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The name and address of the member of the initial Board of  
Directors of the corporation is Arthur J. Berk, 848 Brickell  
Ave., Suite 200, Miami, FL 33131.

The undersigned has executed these Articles of Incorporation this  
30th day of January, 1995.



Capital Connection, Inc.

Barbara Neeley - President  
Incorporator

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

FILED

JAN 31 AM 11:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Five V, Inc.

2. The name and street address of the registered agent and office is: Arthur J. Berk

848 Brickell Ave. #200

Miami FL 33131

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

