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TRANSMITTAL LETTER

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

30,000 LA 15054 3 03/06/95 - 01093 - 0094***** 78.7% **** 78.7%

Keimer & SUBJECT: (Proposed corporate name - must include suffix)

] \$70,00 Filing Foo	\$78.75 Filing Fee & Certificate	\$122.50 Filing Foo & Cortified Copy	\$131.25 Filing Foo, Cartified Copy & Certificate
FROM:		sell T. Accar	di
	ા	I N.W. 39 PL. Address	
		orise, FL. 333 ity, State & Zip	23
		3 <i>05 742 - 376</i> Telephone number	7
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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator (s), for the purpose of forming a corporation inder the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation

ARTICLE I NAME

The name of the corporation shall be

Accardi, Reimer & Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be

11311 N.W. 39 PL. Sunrise, FL. 33323

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is :

One Hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Russell T. Accardi 11311 N.W 39 PL Sunrise, FL 33323

ARTICLE V INCORPORATOR (S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Russell T. Accardi Stacey L. Accardi 11311 N.W. 39 PL. Sunrise, FL. 33323

Michael T. Reimer Tracey K. Reimer 10117 Boynton Place Cir. Boynton Beach, FL. 33435

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 27 th day of February 19 95

Signature

Signature

Mula Signature

Signature

Tracy Review

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA'S STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SURMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Accardi, Reimer 4 Associates	Inc.
2. The name and address of the registered agent and office is:	
<u> Russell T. Accardi</u> (Name)	
Sunrise, Fl. 33323	
(City/State/Zip)	
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.	
(Signature) (Date)	