TRANSMITTAL LETTER

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



SUBJECT: ATM DEBIT SERVICES INC.

300001705499 -02/02/96--01079--009 *****78.75 *****78.75 Enclosed is an original and one (1) copy of the articles of incorporation and a check \$70.00 \$122.50 \$131.25 Filing Fee Filing Fee & Certificate Filing Fee Filing Fee, Certified Copy & Certified Copy & Certificate Additional Copy Required FROM: Name (printed or typed) <u> 305- 570 - 839</u> Daytime Telephone number

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 under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ATM DEBIT SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

177 U.S. HighWay ONE SUITE 134 TEQUESTA, FC. 33469

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

JAMES BERLIN 22 N.E. 11th WAY Deerfield, Fl. 33441

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

JAMES BERLIN 22 N.E. 11th WAY DEERFIELD, Fl. 33441

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30th day of JANUALY 19 96.

Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED 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	ATM DEBIT S	EKUICES, INC
		70 to
2. The name and address of the	registered agent and office is:	LANNA LANNA
JAM	es Berlin	SSE 2 PH 11
22 (P.C	N.E. (th WAY D. Box or Mail Drop Box NOT ACCEPTABLE)	STATE STATE CORIDA
Deep	CHELD FL 33441	

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)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314