CORPORATION(S)	NAME

DAR	Fur	nding	INC.		
Profit ( ) NanProfit	(	) Amendment		( ) Merger	
( ) Foreign	(	Dissolution		) Mark	<del></del>
( ) Limited Partnership ( ) Reinstatement	(	) Annual Report ) Reservation		) Other ) Change of Registe	ored Agent
Certified Copy	(	) Photo Copies	(	) Certificate Under	Seal
( ) Call When Ready ( \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	( ) Will Walt	) Call If Problem	()-Pick Up	) After 4:30 ( ) Mail (	<b>Ο</b> με,
Name Availability Document			Detici	ED	RECEIVED 95 FEB 14 AM 9: 51 VISION OF CORPORATION
Enaminer Updater				JPY	CEIV II AM OF CORP
Varifler					IVED AM 9: 5
Acknowledgment					
W.P. Varifier			F. CHE	SSER TEATA	tggk

CR2E031 (R8-85)

## ARTICLES OF INCORPORATION

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida. ARTICLE I - CORPORATE NAME The name of the corporation is: ARTICLE II - DURATION This corporation shall exist perpetually unless dissolved according to Florida law. ARTICLE III - PURPOSE The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida. The corporation is authorized to issue ) par value Common Stock, which shall be designated "Common Shares". Dollar(s) (\$ \_ ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is: **FLORIDA** CITY The principal office, if known, or the mailing address of the corporation is: NAME AN6 ADDRESS FLORIDA CITY

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

ADDRESS ZOO SA) (; CITY SAME) SA	S GRAJE STATE #/	zip <i>3332</i> 2
NAME ADDRESS	STATE	ZII <i>333</i> 2
ADDRESS		
CITY		
	STATE	ZIP
NAME		
ADDRESS		
CITY	STATE	ZIP
ADDRESS 7130 5W 15	RRSON 8 LANC. STATE F.	follows:
ADDRESS 7/30 540 15 CITY SULLEISE NAME	8 LANE.	
ADDRESS 7/30 5W 15  CITY STATE ISE  NAME  ADDRESS	8 LANE.	
ADDRESS 7/30 5W 15  CITY SLACE ISE  NAME  ADDRESS  CITY	STATE F.	zip <i>33</i> 332)
ADDRESS 7130 5W 15	STATE F.	zip <i>33</i> 332)

## CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

DAR	Funding	INC.	GE FEB 14 P
	(name of corporation)		112: 58 FLORIDA

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

n_700	25W/	58	LANE	
Sil	NRISE	7/	33326	
nas named	LeRon		LARSON	
	foresaid address, as its	Registered	Agent to accept service of process	withir
his state.				

## **ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(required agent)