TRANSMITTAL LETTER

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



SUBJECT: Overal	.1 Personal <i>l</i>	\wareness, Inc.	
· (P	roposed corporate	namo - must include suffix)	
Enclosed is an original for:	and one (1) co	-05/	0001827121 17/9601085001 *122.50 ****122.50
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate	X \$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	
FROM:	725 N. Hi	printed or typed) inancial Services Corp. ghway AlA, Suite A-103 Address	
		3-7706	

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.

> ARTICLEI NAME

The name of the corporation shall be:

Overall Personal Awareness, Inc.

ARTICLE II PRINCIPAL OFFICE

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

744 N.W. 7th Street Boca Raton, F1 33486

ARTICLE III SHARES

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

1,000

ţ

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

> Barbara O'Rourke 744 N.W. 7th Street Boca Raton, FL 33486

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):

Barbara O'Rourko 744 N.W. 7th Street Boca Raton, FL 33486

3th	day of	MAY	cuted these Articles of Inco	
		Barbara	OR	
	Barbara 0'		gnature) on the	·
:	<u> </u>	S	gnature	·,
		Si	gnature	 .

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:	Overall Personal Awareness, Inc.				
2. The name and address of the registe	ered agent and office is:			55 1537 1	623. TO 1
Rarbara	O'Rourke (Name)		mi mr mr	7 M	[]]]
	. 7th Street or Mail Drop Box NOT ACCEPTABLE)		S TATE FLORIDA	PH 10: 1-6	
<u>: Boca Rat</u>	CON, FL 33486 (CITY/STATE/ZIF)				•

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.

Barbara O'Rourke	(S.GNATURE)	May 13, 1996 (DATE)	
		` '	