

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

SUBJECT: SAFE CIR	OTCE PROPERT roposad corporate	IES 1NC . nama - must include su	ffix)					
			•=- ∤ *#	mmm(© 1:3700025 6/20/9601083015 ₩###70.00 *####70.00				
Enclosed is an original and one (1) copy of the articles of incorporation and a check								
for :  X \$70.00  Filing Fee	Filing Foe & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	s131.25 Filing Fee, Cerdfied Copy & Cerdficate y Required					
FROM: Carlos A. Brun  Name (printed or typed)								
9195 Collins Ave. #6-B Address			1/46:					
	(305) 864 ( Daytime	6715 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:

SAFE CHOICE PROPERTIES INC.

### ARTICLE II PRINCIPAL OFFICE

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

(BUSINESS ADDRESS)

9195 Collins Ave. # 6-B Surfside, Fl. 33154 (MAILING ADDRESS)

p.O. BOX 414972 Miami Beach, F1. 33141

#### ARTICLE III SHARES

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

100 (ONE HUNDRED)

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Carlos A. Brun 9195 Collins Ave. # 6-B Surfside, Fl. 33154

### 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):

Carlos A. Brun 9195 collins Ave. # 6-B surfside, Fl. 33154

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
18 day of June . 1996 .
(An additional article must be added if an effective date is requested.)
Signature Signature
Signature

# Notarization is not required

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:	SAFE CHOICE PROP	ERTIES INC.	T. 8		
	·					
2.	The name and address of the reg	istered agent and office is:	Carlos A. Bru 9195 Collins Surfside, Fl.	n #6-85		
		(Name)	<del></del>	\$2°		
	(P.O. )	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)				
		(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)

6-18-96 (DATE)