

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

SUBJECT:

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FLORI	- JUNE Miller	55014	
	Name (printed or typed)	FROM: Na	FRO
	6522 Colomers	6	
7 33433	Address Beca Katen Fi City, State & Zip		

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:

COMVEST GROUP Inc.

ARTICLE II PRINCIPAL OFFICE

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

Boca Raton, F1 33433

FILED
96 JUL -8 MID: 19
SECRETIVESEE FLORDA

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 5 lare @\$1.00 per Share

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

6522 Colomera Br Boca Katon, F1 33433

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):

JUNE Killer 6522 Colomera Dr Boca Kuton, FI 33433 Andrew Miller 6522 Colomera Dr Boca Raton, F1 33433

The und	lersigned	incorporator(s) has(have)	executed these Articles of Incorporation this
_5	_day of	July	, 19 <u>.96</u>
(An addi	itional art	icle must be added if an el	fective date is requested.)
			Line Miller Signature
			Signature
			Signature
			Signature

Notarization is not required

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:	COMIVES	T GROUP .	Inc.
2. The name and address of the regi	stered agent and office is:		SECTION OF
· · · · · · · · · · · · · · · · · · ·	June Mille.	<u>~</u>	TIME TO THE TENT
<u> </u>	6522 Calomer lox or Mail Drop Box NOT ACT		IN ID: 20
	Boca Reston for		S. S. S.
	(CITY/STATE/ZIP)		
Having been named as registered corporation at the place designated agent and agree to act in this capacitating to the proper and complete p	in this certificate, I hereb city. I further agree to co	y accept the appoint mply with the provis	ment as registered
obligations of my position as registe	red agent.		
ASIGNATU	<u>Millis</u> RE)	1/5/96 (DATE)	
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