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

| SUBJECT: | MUSS ENTER | Drises, Inc. | proceed | |
|-------------------------------|----------------------------------|--|--|---|
| | | | = | 900001909539 87/31/9601047019 *****70.00 *****70.00 |
| Enclosed is an original | and one (1) co | py of the articles o | f incorporation a | and a check |
| for: \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate | \$122.50 Filing Fae & Certified Copy Additional Copy | \$131.25 Filing Fee, Cerdified Copy & Cerdificate | (608) |
| FROM: | Amail Y Name | Mn45 (printed or typed) | | o e |
| | 1513.5 | E 2nd ('f Address | | 502 |
| | H.LA | ilbrahu Fu ty, State & Zip | 半33301 | 8-196 |
| | OSU- | 767-9101 | The state of the s | |

NOTE: Please provide the original and one copy of the articles.



August 1, 1996

ANNIE MOSS 1513 SE 2ND COURT FT LAUDERDALE, FL 33301

SUBJECT: A. MOSS ENTERPRISES, INCORPORATED

Ref. Number: W96000016087

We have received your document for A. MOSS ENTERPRISES, INCORPORATED and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6878.

Terri Buckley Corporate Specialist

Letter Number: 896A00036856

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.

The name of the corporation shall be: ARTICLE I NAME

WOLLD FIRMLIA! Group, Incorporate)

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

15135Eand Ut. Fl. Lauderdale, Fl. 33301

ARTICLE III SHARES

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

5000 (Five Housand)

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

Angle Moss 1513 SEANOUT Ft. LAWERDALE, FL 33301

ARTIÇLE 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):

Angle L. Moss President, Via President, Samething, Treasurer 1513 St. and Cy. F1. Linderdate, FC 33301

| The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 19 96 . |
|--|
| (An additional article must be added if an effective date is requested.) Maria Maria 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: | Morld Financial Group, Incorpor | | | | |
|--|--|--|--|--|--|
| 2. The name and address of the registered agent and office is: | | | | | |
| A | MAIL MASS (NAME) 3 5 C Ani) (It ox or Mail Drop Box NOT ACCEPTABLE) | | | | |
| H | CHYSTATEZEP) 33301 | | | | |
| | 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