

P 96000093860
(SAMPLE LETTER OF TRANSMITTAL)

FILED

DATE

96 NOV 12 PM 4:32

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: EVICTON INFORMATION SYSTEMS INC., Inc.
(Name of Corporation)

Gentlemen:

600002003496--7
-11/13/96--01161--019
****122.50 ****122.50

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

DONOVAN DUNCAN
(Individual's Name)

EVICTON INFORMATION SYSTEMS INC.
(Name of Corporation)

MAILING ADDRESS OF CORPORATION

2174 NE 170th. STREET # 101		
NORTH MIAMI, FL. 33162		
PHONE		
Area Code	Number	Ext.
	1-888-229-9700	

RECEIVED
11/15/96

ARTICLES OF INCORPORATION

of

FILED

EVICTON INFORMATION SYSTEMS INC.

(name of corporation)

96 NOV 12 PM 1:32

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, do hereby adopt the following articles of incorporation for such corporation:

SEMINOLE COUNTY, FLORIDA
TALLAHASSEE, FLORIDA

ARTICLE I - CORPORATE NAME

The name of the corporation is:

EVICTON INFORMATION SYSTEMS INC.

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.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue 1,000 shares of common stock, par value \$ 10.00 per share.

ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

2174 N.E. 170th. STREET APT. #101		
STREET ADDRESS		
2174 N.E. 170th. STREET APT. #101		
NORTH MIAMI		
CITY	FLORIDA	ZIP 33162

Mailing address, if different

STREET ADDRESS		
CITY	FLORIDA	ZIP

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

NAME	DONOVAN DUNCAN		
ADDRESS	2174 NE 170th. STREET		
CITY	NORTH MIAMI	FLORIDA	ZIP 33162

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have ONE (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

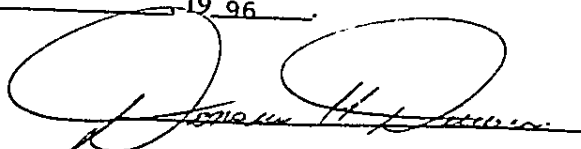
NAME	DONOVAN DUNCAN		
ADDRESS	2174 NE 170th STREET		
CITY	NORTH MIAMI	STATE	ZIP 33162
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	DONOVAN DUNCAN		
ADDRESS	2174 NE 170th. STREET		
CITY	NORTH MIAMI	STATE FL.	ZIP 33162
NAME			
ADDRESS			
CITY		STATE	ZIP
NAME			
ADDRESS			
CITY		STATE	ZIP

The undersigned incorporator(s) have executed these Articles of Incorporation this 11th day of november 19 96.

 (Signature)

____ (Signature)

____ (Signature)

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/ REGISTERED OFFICE

FILED

96 NOV 12 PM 1:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EVICTON INFORMATION SYSTEMS INC.

(name of corporation)

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

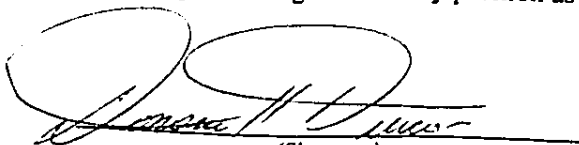
at 2174 NE 170th STREET

NORTH MIAMI, FLORIDA 33162

has named DONOVAN DUNCAN

located at the aforesaid address, as its registered agent to accept service of process within this
state.

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 regis-
tered 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)

11-11-96

(Date)