

TRANSMITTAL LETTER  
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Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

**Additional Copy Required**

96 DEC -4 AM 9:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

15

**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:

Jennifer Matarazzo  
Financial Services Consultant, Inc.

FILED  
96 DEC -4 AM 9:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

8505 LINCOLNSHIRE DRIVE  
BAYONET POINT, FLORIDA 34667

### ARTICLE III SHARES

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

1,000 SHARES OF \$1.00 PER SHARE PAR VALUE  
COMMON STOCK CLASS A

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MS. JENNIFER F. MATARAZZO  
8505 LINCOLNSHIRE DRIVE  
BAYONET POINT, FLORIDA 34667

**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).

MS. JENNIFER F. MATARAZZO  
8505 LINCOLNSHIRE DRIVE  
BAYONET POINT, FLORIDA 34667

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

x 15<sup>th</sup> day of October, 1996.

(An additional article must be added if an effective date is requested.)

Jennifer F. Matarazzo  
Signature

Jennifer Matarazzo  
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: x Jennifer Matarazzo  
x Financial Services Consultant, Inc.
2. The name and address of the registered agent and office is:

MS. JENNIFER F. MATARAZZO  
(NAME)

8505 LINCOLNSHIRE DRIVE  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BAYONET POINT, FLORIDA 34667  
(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.

x Jennifer F. Matarazzo  
(SIGNATURE)

x 10/15/96  
(DATE)

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96 DEC -4 AM 9:45  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA