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TRANSMITTAL LETTER

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Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	- Z TITLE	Ž.	of Americ	w	
SUBJECT:E	- 7 TITLE	10040	Tur		
	(Proposed corpor	ate name)	<u>, ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>	-12/12/9601	179 115002 *****79.00
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Note: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 13, 1996

DENNIS TROXELL 3040 NW 23RD AVENUE #S OAKLAND PARK, FL 33311

SUBJECT: E-Z TITLE LOANS, INC. Ref. Number: W96000026293

We have received your document for E-Z TITLE LOANS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(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) 487-6923.

Doris McDuffie Corporate Specialist Supervisor

Letter Number: 096A00055855

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

E-Z TITLE LOANS OF AMERICA, INC.

(Proposed corporate name)

Frictored is an original and one (1) copy of the articlas of incorporation and a check for

3040 N. W. 23RDAVENUE #5

DAKLAND PARK FIA. 33311

City, State, & Zip

954 735-9727 Telephone Number

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

ARTICLES OF INCORPORATION 95 DEC 19 PIL 1:41

OF.

E-Z TITLE LOANS OF AMERICA, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby edopt(s) the following Articles of Incorporation.

ARTICLE 1 NAME

The name of the corporation shall be:

E-ZTITLE LOANS OF AMERICA, INC.

ARTICITE II PRINCIPAL OFFICE

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

3040 N.W. 23RD AVENUE # 5 OAKLAN D PARK, FIA. 33311

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DENNIS TROXELL 3040 N.W. 23RD AVENUE #9 DAKLAND PARK, FIA. 33311

ARTICLE V INCORPORATORIS

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorpora-

DENNIS TROXEUL 3040 N.W. 23RD AVENUE #5 Dakland Park, FIA. 33311

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

day of Sprature

Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF 96 DEC 19 PH 1:41 REGISTERED AGENT/REGISTERED OFFICE AND STATE LORIDA

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1. The name of the corporation	S. E-Z TITLE LOANS OF AMERICA,	LNO
	•	
•		
2. The name and address of the	registered agent and office is:	
\mathcal{D}	ENNIS TROXELL	•
-	N.W. 23RD AVENUE #5	
	P.O. Box not acceptable)	•
. OA	KLAND PARK, FLORIDA 33311	
	(City/State/Zip)	
	**	
laving been named as registere	d agent and to accept service of process for the	
The appointment as registered at the comply with the provisions of	d agent and to accept service of process for the place designated in this certificate, I hereby accept gent and agree to act in this capacity. I turner agree all statutes relating to the proper and complete perforbiliar with and accept the obligations of my nosition	
nance of my duties, and I am fam	ni stativities relating to the proper and complete perfor- iliar with and accept the obligations of my position	

as registered agent.