RE: DIRECT FUNDING, INC. 283 N. NORTH LAKE BLVD., STE 111 ALTAMONTE SPRINGS, FL 32701

(407)834-1766 FAX 834-2568

000002038680--1 -12/27/96--01010--023 ----****122.50 ****122.50

DEAR DEPARTMENT OF STATE:

I ENCLOSE AN ORIGINAL AND ONE COPY OF THE ARTICLES OF INCORPORATION FOR THE ABOVE PROPOSED CORPORATION.

ALSO ENCLOSED IS A CHECK IN THE AMOUNT OF \$122.50 IN PAYMENT OF THE FOLLOWING FEES:

FILING FEE......\$70.00

CERTIFICATION OF ONE COPY.....\$52.50

DESIGNATION OF REGISTERED AGENT

TOTAL.....\$122.50

PLEASE FILE THE ORIGINAL ARTICLES OF INCORPORATION AND RETURN THE CERTIFIED COPY TO ME AT THE ADDRESS PROVIDED. I MAY CONTACTED DURING NORMAL BUSINESS HOURS AT: (407) 834- 1766

SINCERELY,

JOHN R MOREAU, INCORPORATOR

96 DEC 26 AN 8SECRETATION
SECRETATION
TAILAHASSEE, FLOR

1-2-97 KR

ARTICLES OF INCORPORATION OF THE SERVICE OF THE SER

- 1) THE NAME OF THE CORPORATION IS: DIRECT FUNDING, INC.
- 2) THE DURATION OF THE CORPORATION SHALL BE PERPETUAL.
- 3) THE GENERAL PURPOSE FOR WHICH THIS CORPORATION IS BEING FORMED ARE TO INCLUDE THE TRANSACTION OF ANY OR ALL LAWFUL BUSINESS PERMITTED UNDER THE LAWS OF THE STATE OF FLORIDA.
- 4) THE AGGREGATE NUMBER OF SHARES WHICH THE CORPORATION SHALL HAVE AUTHORITY TO ISSUE IS ONE THOUSAND (1000) COMMON SHARES WITHOUT PAR VALUE.
- 5) THE REGISTERED AGENT AND THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THE CORPORATION IN THE STATE OF FLORIDA IS:

NAME: JOHN R. MOREAU ADDRESS: 283 N. NORTH LAKE BLVD., SUITE 111 **ALTAMONTE SPRINGS, FL. 32701**

THE ADDRESS IS ALSO THE PRINCIPAL OFFICE AND MAILING ADDRESS:

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6) THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS IS ONE (1) AND THE NAME AND ADDRESS OF EACH PERSON WHO IS TO SERVE AS A MEMBER THEREOF IS AS FOLLOWS: NAME: JOHN R. MOREAU ADDRESS: 433 SUN LAKE CIRCLE APT. 303 LAKE MARY, FL 32746 7) THE NAME AND ADDRESS OF THE SOLE INCORPORATOR IS: NAME: JOHN R. MOREAU ADDRESS: 433 SUN LAKE CIRCLE APT. 303 LAKE MARY, FL 32748 IN WITNESS WHEREOF, THE UNDERSIGNED, AS SOLE INCORPORATOR OF THIS CORPORATION HAS EXECUTED THESE **ARTICLES OF INCORPORATION**

DATED: __/2-/9-96

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COUNTY OF SEMINOLE

I, HEREBY CERTIFY THAT ON THIS DAY, BEFORE ME, A NOTARY PUBLIC AUTHORIZED IN THE STATE AND COUNTY NAMED ABOVE TO TAKE ACKNOWLEDGMENTS, PERSONALLY APPEARED: John R. Morent TO ME KNOWN TO BE THE PERSON DESCRIBED AS THE SUBSCRIBER IN AND WHO EXECUTED THE FOREGOING ARTICLES OF INCORPORATION, AND ACKNOWLEDGED BEFORE ME THAT HE SUBSCRIBED TO THESE ARTICLES OF INCORPORATION.

WITNESS MY HAND AND OFFICIAL SEAL IN THE COUNTY AND STATE NAMED ABOVE THIS 1944 DAY OF December 1996	
Thomas J McEtroy My Commission CC599810 Expree November 7 2000	NOTARY PUBLIC-STATE OF FLORIDA DMMISSION EXPIRES: November 7, 2000
•	OR) PRODUCED IDENTIFICATION:
TYPE OF IDENTIFICATION PRODUCE	D:
WITH, AND ACCEPT THE OBLIGATION STATUTES.	E NOTED CORPORATION. I AM FAMILIAR NS OF, SECTION 607.325 OF THE FLORIDA
REGISTERED AG	ENT

FILED
96 DEC 26 AM 8 40
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