

TRANSMITTAL LETTER
997000005008

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

SUBJECT: Silvercrest Investments, Inc.
(Proposed corporate name - must include suffix)

300002056253--1
-01/14/97--01016--019
*****70.00 *****70.00

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

\$70.00
Filing Fee

\$78.75
Filing Fee
& Certificate

\$122.50
Filing Fee
& Certified Copy

\$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: DAN SANTOLI
Name (Printed or typed)

2068 W. SUNRISE ST.
Address

LECANTO, FL. 34461
City, State & Zip

954-345-1904
Daytime Telephone number

JAN 17 11:58 AM BSB

FILED
97 JAN 13 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

SILVER CREST INVESTMENTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

1069 W. ATLANTIC
124
CORAL SPRINGS, FL. 33071

ARTICLE III SHARES

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

10,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

DAN SANTOLI
2068 W. SUNRISE ST.
LELANDO, FL. 34461

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TALLAHASSEE, FLORIDA

**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 SILVERCREST INVESTMENTS, INC.

2. The name and address of the registered agent and office is:

DAN SANTOLI
(NAME)

2068 W. SUNRISE ST.
(P. O. Box or Mail Drop Box NOT ACCEPTABLE)

LEESON, FL. 34461
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

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.

Dan Santoli
(SIGNATURE)

1/8/02
(DATE)