

OFFICE USE ONLY (Document #)

P9700020688
G. ANILBS
11626 NE 2nd Ave
MIAMI FL 33168

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. *EKONE Finance Mktg. Services Inc.*
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time _____

☐ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

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-03/11/97--01031--011
****122.50 ****122.50

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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:

EKONO INSURANCE MULTI SERVICE INC.

ARTICLE II PRINCIPAL OFFICE

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

11626 NE 2nd AVENUE MIAMI, FLORIDA 33168

ARTICLE III SHARES

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

ONE THOUSAND (1000) SHARES of common stock; each share having the value of; ONE (\$ 1.00) dollar.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and adress of the initial registered agent is:

GESNER ANILUS 19220 NW 6th AVENUE MIAMI FLORIDA 33169

97 MAR -6 AM 1:15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

ARTICLE V INCORPORATION(S)

The name (s) and street adress(es) to these Articles of Incorporation is (are):

GESNER ANILUS
President

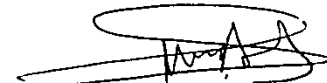
19220 NW 6th AVE MIAMI FL 33169

MONA ANILUS
Vice-President/ Secretary

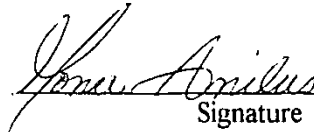
19220 NW 6th AVE MIAMI FL 33169

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

25th day of _FEBRUARY_, 1997_.



Signature



Signature

**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/ REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501 or 617 .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 corporation is: EKONO INSURANCE MULTISERVICE INC.

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

GESNER ANILUS


19220 NW 6TH AVENUE MIAMI, FLORIDA 33056

ADDRESS

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97 MAR -6 AM 1:15
SECRETARY OF STATE
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.


(Signature)

2-25-97
(Date)