

097000029102

TRANSMITTAL LETTER

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

500002128045--3  
-03/31/97--01024--002  
\*\*\*\*\*75.00 \*\*\*\*\*75.00

SUBJECT: Electronic Financial Solutions, Inc.

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

☐ \$70.00  
Filing Fee

☒ \$75.00  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

From: Barbara O'Rourke

7605 SW 173 Street

Miami, FL 33157

(305) 232-8975

FILED  
MAR 31 AM 9:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-1-97

TB

49714 -16236

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:

Electronic Financial Solutions, Inc.

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TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

7605 SW 173 Street  
Miami, FL 33157

### ARTICLE III SHARES

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

100 Shares Common Stock

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Barbara O'Rourke  
7605 SW 173 Street  
Miami, FL 33157

**ARTICLE V INCORPORATOR(S)**

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

Barbara O'Rourke  
7605 SW 173 Street  
Miami, FL 33157

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

27 day of March, 1997.

Barbara O'Rourke

Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**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 Electronic Financial Solutions, Inc.

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

Barbara O'Rourke  
(NAME)

7605 SW 173 Street  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Miami, FL 33157  
(CITY/STATE/ZIP)

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*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.*

Barbara O'Rourke  
(SIGNATURE)

3/27/97  
(DATE)