P91000032810 TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 200002139172--5 -04/10/97--01057--003 ****122.50 *****122.50

FILED

SUBJECT: 7	(Proposed corpora	HOVAL FINANCE ate name - must include suff	IAL SPKVICES	Ine
Enclosed is an origin	nal and one(1) copy of the article	s of incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate	
FROM:	Name (Printed	RUNKUE- I or typed)		j
	Ft. myers, FC		SECRETAKI TALLAHASS	97 APR 10

Ar R 1 1 19971

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

941-492-764>
Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 28, 1997

IRENE ROHR 16 SANTO CT FT MYERS, FL 33912-2070

SUBJECT: INTERNATIONAL FINANCIAL SERVICES, INC.

Ref. Number: W97000007277

TRIAD

We have received your document for INTERNATIONAL FINANCIAL SERVICES, INC. and check(s) totaling \$122.50. However, your check(s) and document are being returned for the following:

The <u>name</u> designated in your document is <u>unavailable since</u> 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.

I HAVE ATTACHED A SAMPLE FORM FOR YOU TO USE.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 487-6922.

Bobbie Cox Senior Corporate Section Administrator

Letter Number: 997A00015846

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

TRIAD INTERNATIONAL FINANCIAL SERVICE, INC.

ARTICLE II PRINCIPAL OFFICE

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

16 SANTO Ct, Ftimyers, FL 33912

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Dennis RiRUNKCE 16 SANTO CT. Ftimyers, FL 33912

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Dennis R. RUNKLE 16 SANTO CT. Ft. MYERS, FC 33912

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

7 th day of Apr. C, 19 97.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE FLORIDA 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 TRIAD INTERNATIONAL FINANCIAL SERVICES, INC.
2.	The name and address of the registered agent and office is:
	Dennis RiRunkle
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)
	Ft. MYPRS, FL 339/2

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) 4-7-97 (DATE)