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4/23/97

PLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS SYSTEM ELECTRONIC FILING COVER SHEET

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DIVISION OF CORPORATIONS TO:

FAX #: (904) 922-4001

071162000147 ACCT#:

FROM: ANTHONY P. BERNARD
CONTACT: ANTHONY BERNARD

PHONE: (305)251-4591

FAX #: (305) 251-1975

NAME: INNER CITY CREDIT SERVICES, INC.

AUDIT NUMBER..... H97000006628

DOC TYPE..... PLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS...O

PAGES..... Pax DEL.METHOD. .

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BM 4124197

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TAX AUDIT #: H97000006628

AX AUDIT#: H9	7000006628	<u>ARTICLES (</u>	OF INCORPORATION			
INNER (CITY CREDIT SERVI	CES, INC.			·····	
		(Nam	e of Corporation)			
THE UNDERSIG	NED SUBSCRIBER(S) O CONTRACT, HEREB	TO THESE ARTICL Y FORM A CORPO	ES OF INCORPORATION AND ER THE L	N, NATURAL AWS OF THE	. PERSON(S) STATE OF FLOR	IDA.
		article i - cor				
THE NAME OF	THE CORPORATION IS	: INNER CIT	Y CREDIT SERVICES	, INC.		
701 N.W. 2	10 ST. # 511, MI	MI - FI - 1.1109				
		ARTICLE II - DU	RATION			
THIS CORPORA	ation shall exist p	erpetually uni	ESS DISSOLVED ACCO	ORDING TO F	LORIDA LAW.	
		ARTICLE III - PI				
INDER THE L	ATION IS ORGANIZED I AWS OF THE UNITED ! NTATION, SEMINARS	STATES AND THE	State of Florida, C	y activitie Omprising (S OR BUSINESS I OF MORTGAGE E	PERMITTED BROKERAGE,
		RTICLE IV - CAP	ITAL STOCK			
THE CORPORA	ation is authorized OCK, which shall be	O TO ISSUE <u>FIVE</u> H DESIGNATED "C	<u>UNDRED</u> SHARES (500 DMMON SHARES".	O) OF ONE DO)LLAR (S) <u>(\$1.00)</u>	PAR VALUE
	article v - I	nitial registe	RED OFFICE AND AG	ENT		
THE NAME AT	ND STREET ADDRESS	OF THE INTIAL RE	GISTERED AGENT OF	THIS CORPO	RATION IS:	
NAMB	MICHAEL C. CAPA					
ADDRESS	100 NE 15 ST.			ZIP 330	20	
CITY	HOMESTEAD	<u>STATE</u>	FLORIDA	ZIP 330	V3V	
		- INTITAL BOARD				
THIS CORPOR	RATION SHALL HAVE	TWO (2) DIR	ECTOR(S) INITIALLY.	THE NUMBE	R OF DIRECTOR	S MAY BE
선언에 어디 만만 다시스템	DISTRIBUTE OF COURSE	IN FROM TIME TO	TIME BY THE BY-LAW	השטפ וחמיפא	T MEADY DE MY	22 III Day on the
(1). THE NAM	ÆS AND ADDRESSES	OF THE INTIAL DI	RECTOR (8) OF THE CO	UKPUKATION	A WE WE LOTTO	ws. _
NAME	MITCHELL MARKS	(PRESIDENT/	TREASURER)			
ADDRESS	701 N.W. 210 8	T. #511. HIAM	L. PL 33169			
CITY	MIANI	STATE.	PL	ZIP	33169	
NAME		(VICE-PRESIDE	AT/SECRETARY)			
ADDRESS	701 N.W. 210 S			ZIP	33169	
CITY	HIAMI	STATE	FL	<u> </u>	-3-1102	
NAME						
ADDRESS		STATE		ZIP		
CITY		SIAIE				
NAME ADDRESS						
CITY		STATE		ZIP	A	9
					Ęδ	-
					生 的	AS TI
		PREPARED BY : A	NTHONY BERNARD		S.₽	FILED or 23 M
			5201 S.W. 95 AVENUE		SE ₹.	II
			ITB. # 109 AIAMI FL 33157		्या	_ LJ
			305) 251- 4591		二 じ	
		•	303) 43 [37 [<u>`</u> 2	
					STATE LORIDA	
TAX AUDIT	#: 897000006628				ĭm	7: 49

FAX AUDIT #: H97000006628

ARTICLE VII - INCORPORATORS

mitchel	L MARKS (PRESIDENT/TREASURER)		
RESS 701 N.W	. 210 ST. # 511	7TP 33169	
IHAIM Y	STATE YL	ZIP 33169	
VIE.			
ORBSS		2.TP	
Υ	STATE		
MB			
DRESS	STATE	2.IP	
<u>Y</u>			
MB			
DRESS	STATE	ZIP	
WITNESS WHEREOF IS 23RD	THE UNDERSIGNED SUBSCRIBER(S) HAVE DAY OFAPRIL	EXECUTED THESE ARTICLES O 19 <u>97</u> .	F INCORPORATION
	mischell ha	r R	(SEAL
			(SEAL
			(SEAL
CATE OF FLORIDA			
ORTH ABOVE, PERS	RY PUBLIC PUBLIC AUTHORIZED TO TAKE A ONALLY APPEARED ELL MARKS (PRESIDENT/TREASURER)	CKNOWLEDGEMENTS IN THE S	STATE AND COUNT
AND WHO ACKNOW	KNOWN TO BE THE PERSONSS) WHO EXECUTE LEDGED BEFOR ME THATHEEXECUTE OF, I HAVE HEREUNTO AFFIXED MY HAND A DAY OFAPRIL	THESE ARTRICES OF MOOR	0.011,000

FAX AUDIT #: #97000006628

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

INNER	CITY	CREDIT	SERVICES, (NAME)	of Corporation)	
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FURSUANT TO FLORIDA STATUTES SECTIONS 48.091 AND 601.034. THE FOLLOWING SUBMITTED: THE ABOVE CORPORATION, DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS REGISTERED OFFICE AS INDICATED IN THE ARTICLES OF INCORPORATION

AT 100 NE 15 ST. / 103-C. HOMESTEAD, PL 33030

HAS NAMED MICHAEL C. CAFARO

LOCATED AT THE AFORESAID ADDRESS, AS ITS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS WITHIN THIS STATE.

ACKNOWLEDGEMENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT TO ACT IN THIS CAPACITY, AND AGREE TO COMPLY WITH THE PROVISIONS OF FLORIDA LAW IN KEEPING OPEN SAID OFFICE.

(REGISTERED AGENT)

PREPARED BY : ANTHONY BERNARD

16201 8.W. 95 AVENUE

STE.# 109 MIAMIFL 33157 (305) 251-4591 CRETARY OF STATE

FAX AUDIT #: 19700006628