P97000045318

Faron L. Cajthaml, Esq. P. O. Box 149024 Orlando, Florida 32814

(407) 658-5202

May 15, 1997

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 200002183472---4 -05/19/97--01140--003 ****122.50 ****122.50

RE: Central Florida Small Claims, Inc.

Dear Sir:

Please rush the attached Article of Incorporations as the Incorporator will be calling in a few days for the docket number. I am enclosing a money order for the appropriate fees.

Thanking you in advance for your cooperation in this matter.

With kind regards,

I remain,

Faron L. Cajthaml Esquire

Enclosure

FILED 97 MAY -9 PM 3-40 SECRETARY OF STATE

ne 5/21/97

ARTICLES OF INCORPORATION

OF

Central Florida Small Claims Professionals, Inc.

ONE: The name of the incorporation is Central Florida Small Claims Professionals, Inc.

TWO: The duration of the corporation shall be perpetual.

THREE: The general purpose or purposes for which this corporation is being formed are to include the transaction or any or all lawful business permitted under the laws of the State of Florida.

FOUR: The aggregate number of shares which the corporation shall have authority to issue is TWO HUNDRED (200), common shares having a par value of \$1.00 per share.

FIVE: The registered agent and the street address of the initial registered office of the corporation in the State of Florida is:

Name

Address

Nancy J. Kacmarik

831 Nana Avenue

Orlando, Florida 32809

FIVE (A): The principal office and the mailing address for the principal office is: 831 Nana Avenue, Orlando, Florida 32809.

SIX: The number of directors constituting the initial board of directors is <u>two (2)</u> and the name and address of each person who is to serve as a member thereof is as follows:

Name

Address

Lorraine C. Arnold

851 Benchwood Drive

Winter Springs, Florida 32708

Nancy J. Kacmarik

831 Nana Avenue

Orlando, Florida 32809

SEVEN: The name and address of the sole incorporator is:

Name

Address

Lorraine C. Arnold

851 Benchwood Drive

Winter Springs, Florida 32708

IN WITNESS WHEREOF, the undersigned, as sole incorporator of this corporation has executed these Articles of Incorporation.

DATED: MAY 14 1997

Lorraine C. Arnold

STATE OF FLORIDA

COUNTY OF ORANGE

I, HEREBY CERTIFY that on this day, before me, a Notary Public authorized in the State and County named above to take acknowledgments, personally appeared Lorraine C. Arnold, to me personally known to be the person described as the subscriber in and who executed the foregoing Articles of Incorporation, and acknowledged before me that she subscribed to those Articles on Incorporation.

WITNESS my hand and official seal in the County and State named above this 14th day

f / MAY / , 199

_Notary Public

(SEAL)

Nancy L. Conover
MY COMMISSION # CC827680 EXPIRES
March 6, 2001
BONDED THRU TROY KAIN HISURANCE, INC.

I, the undersigned, hereby accept the appointment as Registered Agent of the above noted

corporation, I am familiar with, and accept the obligations of, Section 607.325 of the Florida Statutes.

Yanay J. Kamarik

97 MAY -9 PM 3-1 SECRETARY OF STATE