9700005158 FILED SECRETARY OF STATE COVIDEN OF CORPORATIONS 97 JUN 11 PM 12: 26 City/State/Zip Pho Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) 2. (Corporation Name) (Document #) 3. (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time _ Certified Copy Will wait Photocopy Mail out Certificate of Status NEW FILINGS AMENDMENTS 900002200969--1 -06/04/97--01036--011 ****122.50 *****122.50 Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger

双	OTHER FILINGS
•	Annual Report
	Fictitious Name
	Name Reservation

Profit

PREGISTRATION/AQUALIFICATION
Foreign
Limited Partnership
Reinstatement
 Trademark
 Other

W97-13186

Examiner's Initials 6-11-97



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 5, 1997

THOMAS W. TOLBERT 5780 PLUNKETT ST. BAY ONE HOLLYWOOD, FL 33023

SUBJECT: FINANCE ONE,INC. Ref. Number: W97000013186

We have received your document for FINANCE ONE, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since 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.

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) 487-6929.

Randall Purintun Document Specialist

Letter Number: 697A00030450

ARTICLES OF INCORPORATION

97 JUN 11 PH 12: 26

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:

TOLBERT FINANCIAL SERVICE, INC.

ARTICLE II PRINCIPAL OFFICE

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

5780 PLUNKETT ST., BAY ONE HOLLYWOOD, FL. 33023

ARTICLE III SHARES

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

100,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Thomas W. Tolbert 5780 Plunkett St., Bay One Hollywood, FL. 33023

ARTICLE V INCORPORATOR(S)

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

Thomas W. Tolbert 5780 Plunkett St., Bay One Hollywood, FL. 33023

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

9 day of Jam. 1997.

Thomas le Second

Signature

97 JUN 11 PH 12: 26

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 the corporation is: Tolbert Financial Service, Inc.
- 2. The name and address of the registered agent and office is:

Thomas W. Tolbert

5780 Plunkett St., Bay One
Hollywood, FL, 33023

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)

(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL