

97 JUL -7 MI 10: 42

TALLAHASSEE, FLORIDA

JUNE 11, 1997

DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FLORIDA 32314

900002231219--4 9000070797-0094-015 ****131.25 ****131.25

RE: CAMBRIGE PREMIUM FINANCE, INC.

DEAR SIR/MADAM,

ENCLOSED PLEASE FIND A CHECK FOR \$ 131.25, PLEASE REMIT THE FOLLOWING:

- 1. ARTICLES OF INCORPORATION, WITH THE ORIGINAL CERTIFICATION BY STATE OF DOMICILE (\$ 52.50)
- 2. CERTIFICATE OF STATUS FROM THE STATE OF DOMICILE SHOWING GOOD STANDING INDICATION, SEALED BY THE STATE AND SIGNED BY PROPER PUBLIC OFFICIAL (\$ 8.75)
- 3. ARTICLES OF INCORPORATION, (APPLICATION \$ 70.00)

SHOULD YOU HAVE ANY QUESTIONS, PLEASE DO NOT HESITATE TO CALL.

SINCERELY.

DONNA S. CUESTA

ENCLOSURES

DSC

OH 18/97

TRANSMITTAL LETTER

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

Note: Additional copy of articles is needed when certified copy is requested.

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

QE

CAMBRIDGE PREMIUM FINANCE, INC.

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 | NAME

The name of the corporation shall be:

CAMBRIDGE PREMIUM FINANCE, INC.

ARTICLE II PRINCIPAL OFFICE

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

10691 N. KENDALL DR. STE. 304 MIAMI, FL. 33176

ARTICLE III CAPITAL STOCK

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

1,000 SHARES AT \$1.00 PER VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

STEVEN WEXLER

10691 N. KENDALL DR. STE. 304 MIAMI, FL. 33176

ARTICLE V INCORPORATOR(S)

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

STEVEN WEXLER
CAROLYN S. FRIEDMAN
10691 N. KENDALL DR. SUITE 304
MIAMI, FL. 33176

The undersigned has (have) executed these Articles of Incorpora	ation this
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Sto Tush	
Signature/Title	Steven Wexler President, Sec. & Director
Signature/Title	Carolyn S. Friedman Vice-President, Treasurer&Director
Signature/Title	

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

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Pursuant to the provisions of sections 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: CAMBRIDGE PREMIUM FINANCE, INC.
2.	The name and address of the registered agent and office is:
	Steven Wexler (NAME)
	10691 N. Kendall Dr. Suite 304 (P.O. BOX NOT ACCEPTABLE)
	Miami, Fl. 33176
	(CITY/STATE/ZIP)

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 PER-FORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGA-TIONS OF MY POSITION AS REGISTERED AGENT.

> SIGNATURE DATE