7000078597

Department of State

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	;				
SUBJECT:	5t. FINANCIAL (Proposed co	Orp. Of M. orporate name - must include	AMERICA e suffix)	_	
			00000227 -08/20/21 75.87*****	1:3:5:0 E =01012022 5 ******18.75	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for :					
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED		
FROM: _	Michael Fitzpa Namle (Pi	trick rinted or typed)			
	1403 Brondmong	Address			
	dl to la lat			밀	

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

954-971-7)19

Daytime Telephone number

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be:

1st FINANCIAL COIP. OF N. AMERICA

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ARTICLE II PRINCIPAL OFFICE

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

1403 Broadmoor N. Lauderdale FL. 33068

ARTICLE III SHARES

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

one

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Michael Fitzpatrick 1903 Broadmoor N.LAUderdale FL, 33068

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

Michael FitzDatrick

N. LAUderdale FL 33068

8/15/97 Date

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

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/Registered Agent