

P97000101784

TRANSMITTAL LETTER

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

SUBJECT: Paola Telemarketing Corp.
(Proposed corporate name - must include suffix)

800002359458--5
-12/01/97--01140--026
*****70.00 *****70.00

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 COPY REQUIRED

FROM: Gordon & Fernandez Management Services, Inc.
Name (Printed or typed)

6915 Red Road Suite 204
Address

Coral Gables, FL 33143
City, State & Zip

(305) 662-1996
Daytime Telephone number

FILED
97 DEC -1 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Handwritten signature and date 12/1/97

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 NAME

The name of the corporation shall be:

Paola Telemarketing Corp.

ARTICLE II PRINCIPAL OFFICE

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

7125 Southwest 111 Court
Miami, Florida 33173

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Paola Perez
7125 Southwest 111 Court
Miami, FL 33173

ARTICLE V INCORPORATOR

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

Paola Perez
7125 SW 111 Court
Miami, FL 33173

Paola Perez S

Signature/Incorporator

11-13-97

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

Paola Perez S

Signature Registered Agent

11-13-97

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA