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TRANSMITTAL LETTER

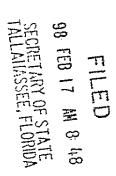
Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

900002434789--1 -02/19/98--01012--007 ******78.75 ******78.75

SUBJECT: Gotsis Financial Inc.	
I enclose the original Articles of Incorporation for the above corporation and a check in the amount of \$ 78.75	
(Filing Fee & Certificate)	
signed: Sun Sta	-
From:	
Gus Gotsis	2
Name	-
3417 Park Square West Suite 2 Address	
Tampa FL 33613	
City State Zip	
1 800 765 5488 Telephone Number	
Terebitotie ummer	

JN2-18-98

OF Gotsis Financial Inc.



ARTICLE I NAME

The name of the corporation shall be: Gotsis Financial Inc.

ARTICLE II PRINCIPAL OFFICE

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

3417	Park	Square	West	
Sui	lte 2			
Tampa	a FL 3	33613		

ARTICLE III CAPITAL STOCK

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 ADDRESS

The name and address of the initial registered agent is:

Michael P. Massimini	CPA
701 W Swann Ave	
Suite 5	
Tampa FL 33606	

ARTICLE V INCORPORATOR

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

Gus Gotsis	
3417 Park Square West	
Suite 2	
Tampa FL 33613	

The	undersi	igned	has	executed	d these	Articles	ο£	Incorporation	this
	10	day	of F	ebruary :	L998.				

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, 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:
Gotsis Financial Inc.	
2. The name and address of the	registered agent and office is:
Michael P. Massimini CPA 701 W Swann Ave Suite 5 Tampa FL 33606	98 FEB SECRETAR TALLAHAS
Signature:INCORPORATOR	SEE, FLORIDA
Date:	

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: 2 (8(9))

Date: