

P98000022106

March 3, 1998

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

SUBJECT: Amerinda Corporation

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:  
\$78.75 for the filing fee and certificate.

FROM: Carolyn Brown  
2711 Summertree Lane  
Gulf Breeze, FL 32561

Telephone: 850-916-7953

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-03/06/98--01070--027  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Thank you,

  
Carolyn Brown

Dmc  
3/9/98

FILED  
98 MAR -6 PM 4:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION  
OF  
AMERINDA CORPORATION**

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: AMERINDA CORPORATION

**ARTICLE II  
PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:  
2711 Summertree Lane, Gulf Breeze, Florida 32561.

**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 of class A common stock at a par value of one-tenth cent (\$0.01) each.

**ARTICLE IV  
INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and Florida address of the initial registered agent are: Carolyn Brown,  
2711 Summertee Lane, Gulf Breeze, Florida 32561.

**ARTICLE V  
INITIAL INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:  
Carolyn Brown, 2711 Summertree Lane, Gulf Breeze, Florida 32561.

Carolyn Brown  
Signature/Incorporator  
CAROLYN BROWN

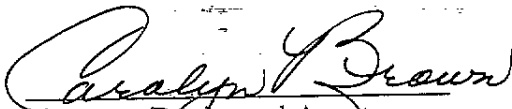
March 3, 1998  
Date

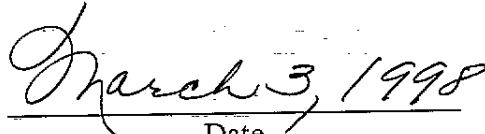
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service 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  
CAROLYN BROWN

  
Date