MODDAN	Charter Number Only
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CORPORATION(S) NAME	

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) Profit) NonProfit	() Amendment	() Merger	SEDE VED 98 MAY 19 AM 9: 18 01V15:01 OF CUMPORATION	_ -
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) Limited Partnership) Reinstatement	() Annual Report) Reservation	() Other) Change o	of Registered Agent	
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CR2E031 (R8-85)

ARTICLES OF INCORPORATION

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 I NAME

The name of the corporation shall be:

BUDGET BILLING INC.

98 MAY 19 AM II: 03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

3205 SW 106AVE_ MIAMI, FL. 33165

ARTICLE III SHARES

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

100 \$ 1.00 Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

CIRA C. ERESCO 3205 SW 106 AVE MIAMI, FL. 33165

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

CIRA C. FRESCO 3205 SW 106 Ave MIAMI FL. 33165

The unde	rsigned in	corporator(s) has	s(have) executed the	se Articles	of Incorpo	ration this
18	day of _	MAY	, 19	98		
	,	I was	neved		*7	<u>-</u>
		<i>'</i>	Signature		- V	
			Signature			
		<u></u>	Signature			

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF 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:	BUDGET BILLING INC.			
**	TIM IMMINA AT THE L				
2.	The name and address of the regis	tered agent and offic	e is:		
	CIRA.	C. FRESCO	 	- -	
		(Name)			
	3205 SW 1			<u></u>	
	(P.O. B	ox or Mail Drop Box NO	T ACCEPTABLE)		
	MIAMI	, FLORIDA 3316	55	-	,
		(CITY/STATE/ZIP)		
		,		Compatible of	hove stated

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.