P98000045274

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

SUBJECT:	CALFRAC AND ASSO (Proposed corpo	CIATES, INC. prate name - must include suf	Tix)	·
		4	00002527 -05/18/98 ****122.50	7142 - 01107010 ****122.50
Enclosed is an original ar	nd one(1) copy of the article	es of incorporation and a	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	Filing Fee & Certified Copy ADDITIONAL CO	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	DAN RIVERA Name (1	Printed or typed)		
_	5769 N.W. 7th	Street, Suite 30 Address	1	
<u></u>	Miami, FL 331 City	1 2 6 , State & Zip	.	JIVISION OF
	(305) 267-9315	(305) 267-9315		4 9 3 . .

DIVISION OF CORPORATION



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.

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

CALFRAC AND ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

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

5769 N.W. 7th Street, Suite 301 Miami, FL 33126

ARTICLE III SHARES

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

1,000 at \$1 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DAN RIVERA 5769 N.W. 7th Street, Suite 301 Miami, FL 33126

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Dan Rivera 5769 N.W. 7th Street, Suite 301 Miami, FL 33126

Signature/Incorporator

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

Date