. * 			
PARM	TRANSMIT	TAL LETTER DIVIS	ECRETARY OF STATE SION OF CORPORATIONS MAY 18 PM 12: 37
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	,	-700	
SUBJECT: PSEXPER	TS IN ( Proposed corpora	te name - must include suff	ïx)
		4	000025276 -05/18/98010 ******78.75 *
Enclosed is an original and one(1) copy	y of the articles	of incorporation and a c	heck for :
\$70.00 \$78. Filing Fee Filing I & Certi	<sup>2</sup> ee	\$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM: Roha	Name (Pri	nted or typed)	
1490		1 terrace	

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

North MIAMI BEACL, FL 38162
City, State & Zip

305 949-7558

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.

	•
ARTICLE I NAME The name of the corporation shall be:	
PSEXPERTS INC	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corpo	oration shall be:
1490 NE 151 terrace	
N. MIAMI BEACH, FL 33162	
70 THAIR BENERY FE JOINE	
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized	to have outstanding at any one time is:
1400	
1000	
	·
ARTICLE IV INITIAL REGISTERED AGENT A	
The name and Florida street address of the initial registered ager	nt are:
KOHAN HALL	•
1490 NE 151 terrall	<del></del> ;
N. Miami Beach, FL 33162	
ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of 1	incorporation are:
ROHAN HALL	
1490 NE 151 Ferrace	
N Miami Bch, FC 33/62	· •
Tal Hall	5/10/98
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 pro	cess for the above stated corporation at the place designated in this
certificate, I hereby accept the appointment as registered agent and	
provisions of all statutes relating to the proper and complete pe	rformance of my duties, and I am familiar with and accept the
-obligations of my position as registered agent	j /
obligations of my position as registered agent	5/10/98

Signature/Registered Agent

Date