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

600002663366--3  
-10/14/98--01035--020  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: S.M.P. Financial Consultants, Inc.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: James J. Caprio  
Name (Printed or typed)

4890 4890 N.W. 65 Avenue  
Address

Lauderhill, FL 33319  
City, State & Zip

1800-999-1333  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

98 OCT 14 AM 10:07

FILED

Dmc  
10-15-98

(2)

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

**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.*

**FILED**  
98 OCT 14 AM 10:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

S.M.P. Financial Consultants, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

7050 sw 23 street Davie, Fl 33317

**ARTICLE III SHARES**

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

4000 shares of common stock

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

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

James J. Caprio  
4890 NW 65 Avenue Lauderhill, Fl 33319

**ARTICLE V INCORPORATOR**

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

James J. Caprio  
4890 NW 65 Avenue Lauderhill, Fl 33319

  
\_\_\_\_\_  
Signature Incorporator

10/13/98  
\_\_\_\_\_  
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

10/13/98  
\_\_\_\_\_  
Date