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DIVISION OF CORPORATIONS TO:

FAX #: (850)487-6013

FROM: EMPIRE CORPORATE KIT COMPANY

072450003255 ACCT#:

CONTACT: RAY STORMONT PHONE: (305)541-3694

FAX #: (305)541-3770

NAME: AMERI-MED FINANCIAL SERVICE, S INC.

AUDIT NUMBER...... H98000019971

DOC TYPE FLORIDA PROFIT CORPORATION OR P.A.

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ARTICLE IV

CAPITAL STOCK

The maximum number of shares of stock which this corporation is authorized to have outstanding at any one time is one million (1,000,000) shares of Common Stock, each share having \$0.001 par value.

ARTICLE Y

INITIAL CAPITAL CONTRIBUTION

The amount of capital with which this corporation shall begin business shall not be less than Five Hundred (\$500.00) Dollars.

ARTICLE VI

SUBSCRIBERS

The name and address of the subscriber of these Articles of Incorporation and the number of shares he has elected to take are as follows:

ADDRESS

NUMBER OF SHARES

Robert D. Press

1100 Ponce de Leon Bivd. Coral Gables, FL 33134 1

ARTICLE VII

DIRECTORS

The initial number of Directors of this corporation shall be one (1). The number of Directors may either be increased or decreased from time to time by a vote of the stockholders in conformity with the By-Laws of the Corporation but shall never be less than one (1).

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ARTICLES OF INCORPORATION

(G)

<u>of</u>

AMERI-MED FINANCIAL SERVICES, INC.

I, the undersigned incorporator of this corporation under Florida Statute 607, as amended, do hereby associate myself to form a corporation and adopt the following Articles of Incorporation.

ARTICLE I

The name of this corporation is:

AMERI-MED FINANCIAL SERVICES, INC.

The mailing address for the Corporation is:

1100 Ponce de Leon Blvd., Coral Gables, Florida 33134

ARTICLEII

PURPOSE AND NATURE OF BUSINESS

The purpose of this corporation and general nature of the business to be conducted are as follows:

A. To engage in any business activity or endeavor which is lawful under the laws of the State of Florida, and the United States of America.

ARTICLE III

DURATION OF CORPORATION

This corporation is to have perpetual existence commencing on the date of execution and acknowledgment of these Articles of Incorporation.

THIS INSTRUMENT PREFARED BY:
MAYNARD J. HELLMAN, ESQUIRE
FLORIDA BAR NO. 137411
1100 PONCE DE LEON BLYD.
CORAL GABLES; FLORIDA 33134
(305) 448-5282 - telephonit
(305) 443-2176 - Ex

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ARTICLE VIII

INITIAL BOARD OF DIRECTORS

The name and address of the member of the initial Board of Directors who, subject to the provisions of the Certificate of Incorporation, the By-Laws and the Corporation Laws of the State of Florida, shall hold office for the first year of the corporation's existence, or until his successor is elected and qualified, is:

NAME

ADDRESS

Robert D. Press

1100 Ponce De Leon Boulevard Coral Gables, FL 33134

ARTICLE IX

VOTING RIGHTS

Except as otherwise provided by law, the entire voting power for the election of Directors and for all other purposes shall be vested exclusively in the holders of the outstanding common shares.

ARTICLE X

PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLEXI

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 1100 PONCE DE LEON BLVD. CORAL GABLES, FLORIDA, and the name of the initial Registered Agent of this corporation

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at that address is MAYNARD J. HELLMAN.

ARTICLE XII

INDEMNIFICATION

The corporation shall indemnify any Officer or Director, or any former Officer or Director, to the full extent permitted by law.

DATED this 27 day of October 1998

ROBERT D. PRESS

STATE OF FLORIDA)
(SS COUNTY OF DADE)

BEFORE ME, the undersigned authority, personally appeared ROBERT D. PRESS, to me well known to be the person described in and who executed the foregoing Certificate of Incorporation, and who acknowledged before me, according to law, that he made and subscribed the same for the purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal at Coral Gables, Dade County, Florida, this 27 day of October, 1998.

Notary Public, State of Florida at Large

My Commission Expires:

SHIRLEY SMITH
My County Esp. 5/20/99
Bonded By Service ins
No. CC44/022

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AMERI-MED FINANCIAL SERVICES, INC.

CERTIFICATE DESIGNATING PLACE OF	BUSINESS OR DOMICILE FOR THE PURPOSES OF
PROCESS WITHIN FLORIDA, NAMINO	GAGENT UPON PROCESS
MAY BE SERVED	
IN COMPLIANCE WITH SECTION	1 48.091, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED:	
FIRST, THAT AMERI-MED FINAN	VCIAL SERVICES, INC. IS DESIRING TO ORGANIZE
OR QUALIFY UNDER THE LAWS OF THE	ESTATE OF FLORIDA, WITH ITS PRINCIPAL PLACE
OF BUSINESS AT THE CITY OF COR	AL GABLES, STATE OF FLORIDA, HAS NAMED
	AT 1100 PONCE DE LEON BOULEVARD, CORAL
GABLES, STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN	
FLORIDA.	Signature: ROBERT D. PRESS
	Title: Subscriber Date: 10/2-7/98
vv	es of process for the above stated corporation, at the place
designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with	
	proper and complete performance of my duties.
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