TRANSMITTAL LETTER 2

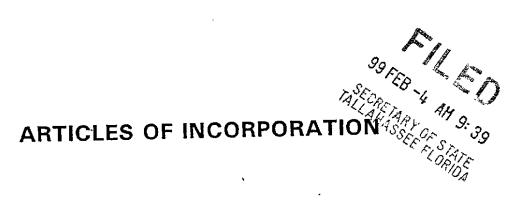
Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 100002764981--2

-02/04/99--01080--016 *****70.00 *****70.00

SUBJECT: TARGET CONSULTING GROUP NC (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 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate FROM: Name (printed or typed) City, State & Zip Daytime Telephone number

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



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 | NAME

The name of the corporation shall be:

TARGET CONSULTING GROUP, INC

ARTICLE II PRINCIPAL OFFICE

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

7000 E. CypnessHEAD De PARKLAND, FL 33067

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CLAUDETTE GOODMAN 7000 E. CYPNETSHEAD De PARKLAND, FL 33067

ARTICLE V INCORPORATOR(S)

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

CLAUDETTE GOODMAN 7000 E. CYPRESSHEAD DR. PARKLAND FL 33067

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

TANUARY 19 99.

Glaudite Toolson

Signature

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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.

2. The name and address of the registered agent and office is:
CLAUDETTE GOODMAN
7000 E. CYPRETSHEAD DR, PARKLAND, FE 33067
(P.O. Box or Mail Drop Box NOT acceptable)
954-344-9199
(City/State/Zip)
Having been named as registered agent and to accept service of process for the same above stated corporation at the place designated in this certificate, I hereby accept
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 past tion as registered agent.
The state of the s
(Signature) (Date)