P9900023574

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

SUBJECT: Seekonk Investment Corp. (Proposed corporate name - must include suffix)			
			200002800992 -03/10/9901075006 *****70.00 ******70.0
Enclosed is an original \$70.00 Filing Fee	l and one(1) copy of the article \$78.75 Filing Fee & Certificate of Status	s of incorporation and a \$\begin{aligned} \$\frac{1}{2}\$78.75 & Filing Fee & Certified Copy & \textbf{ADDITIONAL CO} \$\textbf{ADDITIONAL CO}\$	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	-	G. Richtarcik inted or typed)	
Warren, Michigan 48092 City, State & Zip			99 MAR 10 PHI2: 28 TALLAHASSEE, FLORI
		558-8580 elephone number	DRIDA DRIDA

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

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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:

Seekonk Investment Corp.

ARTICLE II PRINCIPAL OFFICE

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

360 Camino Gardens Blvd., Suite 200, Boca Raton, FL 33432

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 2,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Ira Smolev, 350 Camino Gardens Blvd., Suite 200, Boca Raton, FL 33432

ARTICLE V INCORPORATOR

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

Ira Smolev

360 Camino Gardens Blvd., Suite 200, Boca Raton, FL 33432

Signature/Incorporator

Date

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(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

303 99 Date