

P99000030280

TRANSMITTAL LETTER

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

100002821531--0  
-03/29/99-01078-004  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: ASAP Financial Services 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: KATHRYN A. LOUIS  
Name (Printed or typed)

184 SW 8TH Ave.  
Address

BOCA RATON, FL 33486  
City, State & Zip

561-392-6051  
Daytime Telephone number

FILED  
99 MAR 29 PM 4: 21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

B. BROCK APR 1 1999

## 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:

ASAP FINANCIAL SERVICES, INC.

### ARTICLE II PRINCIPAL OFFICE

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

184 SW 8TH AVE., BOCA RATON, FL 33486

### ARTICLE III SHARES

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

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: KATHRYN A. LOUIS

184 SW 8TH AVE., BOCA RATON, FL 33486

### ARTICLE V INCORPORATOR

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

KATHRYN A. LOUIS  
184 SW 8TH AVE., BOCA RATON, FL. 33486

Kathryn A. Louis  
Signature/Incorporator

3/27/1999  
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

Kathryn A. Louis  
Signature/Registered Agent

3/27/1999  
Date

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99 MAR 29 PM 4:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA