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Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255
Phone: (305)541-3694
Fax Number: (305)541-3770

SECRETARY OF STATE | TALLAHASSEE FLORINA

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FLORIDA PROFIT CORPORATION OR P.A.

ESCROWCARD, INC.

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ARTICLES OF INCORPORATION

OF

EscrowCard, Inc.

These Articles are in compliance with Chapter 607, F.S.

Article I

The name of this corporation shall be: EscrowCard, Inc.

Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

Article III

The principal place of business and mailing address of this corporation shall be: 19020 N.E. 20th Avenue, Miami, Fl 33179

Article IV

The general nature of business of this corporation is to transact any and all lawful business.

Article V

The number of shares which this corporation shall have authority to issue is 500.00 shares, having an individual par value of \$ 1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

Article VI

The name and street address of the initial Registered Agent of this corporation shall be: Max Abecassis, 19020 N.E. 20th Avenue, Miami, Fl 33179

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Article VII

The initial board of Directors shall consist of a total of 1 person(s) and the name and address of the person(s) who are to serve as an initial director(s)

Max Abecassis 19020 N.E. 20th Ave. Miami, Fl 33179

Article VIII

The name and address of the incorporator executing these Articles of Incorporation is:

> EMPIRE CORPORATE KIT OF AMERICA, INC. 1492 WEST FLAGLER STREET #200 MIAMI, FL 33135

The undersigned has executed these Articles of Incorporation this 11th day of May ,1999.

Ray Stormont, President

Signing for

Empire Corporate Kit of America, Inc.

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits, organized under the statement in designating the registered office/registered agent, in the state of Florida.

First thatEscrowCard		
(Name of C	orporation)	
desiring to organize under the	e laws of the State ofFLORIDA	
(Florida) with its principal office, as indicated in the articles of		
incorporation has named <u>Max Abecassis</u>		
(Name of Registered Agent) located at 19020 N.E. 20th Ave.		
City of <u>Miami</u>	County of Dade	
(City)	(County)	

State of Florida, as its agent to accept service of process within this state.

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 THE 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.

99 MAY 11 PM 12: 50
SECRETARIA OF STATE
TALLAHASSIE, FLORIDA

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