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TRANSMITTAL LETTER

FILED

99 SEP 30 AM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500003001925--6

-09/30/99-01077-004
*****78.75 *****78.75

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

SUBJECT:

United STATES FINANCIAL GUARANTY
(Proposed corporate name - must include suffix)
CORPORATION

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

ADDITIONAL COPY REQUIRED

FROM:

GENNARO J. ORRICO

Name (Printed or typed)

2128 VISTA DRIVE

Address

JUNO, FLORIDA 33408

City, State & Zip

561-882-0770

Daytime Telephone number

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

D. BROWN OCT - 4 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.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

UNITED STATES FINANCIAL GUARANTY CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

2128 VISTA DRIVE, JUNO, FLORIDA 33408

ARTICLE III SHARES

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

600

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

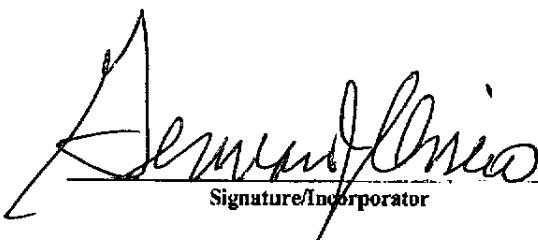
The name and Florida street address of the initial registered agent are:

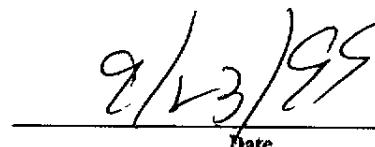
GENNARO J. ORRICO - 2128 VISTA DRIVE, JUNO,

FLORIDA, 33408

ARTICLE V INCORPORATOR

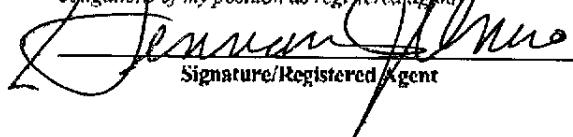
The name and address of the incorporator to these Articles of Incorporation are:

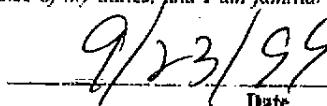

Signature/Incorporator


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.


Signature/Registered Agent


Date