# P00000054652

### TRANSMITTAL LETTER

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Department of State		-		
Division of Corporations				
P. O. Box 6327 Tallahassee, FL 32314	<u></u>			
Tallallassee, FL 32314	·	=	2	
		É SEC		
		AH/	2000 MAY	T
SUBJECT: M	Iobility America, Inc.	ARY ASSE	30	1
SOBJECT	(Proposed corporate name - must include suffix)	—mg	70	
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		ATE	<del>. ب</del>	
		I»	9	
Enclosed is an original and on	e (1) copy of the articles of incorporation and a check for :			
4-2-4-				_
X \$78.50 Filing Fee 8	\$122.50  Recordificate Filing Fee & Certified Copy			
i lillig i ee c	A Certificate: Timing Fee & Certifical Copy			
FROM:	Leila F. Mnassa			
<u> </u>	Name	_		
	5424 Deerbrooke Creek Cr Apt. 6			
	Street Address			
	Tampa Florida 33624			
	City, State & zip			,
	(813) 265 - 0562			
	Daytime Phone Number	_		-

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

2000 MAY 30 AM IO: 39

SECRETARY OF STATE TALLAHASSEE, FLORIDAT

## ARTICLES OF INCORPORATION

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 I NAME

The name of the corporation shall be:

Mobility America, Inc.

#### ARTICLE II PRINCIPAL OFFICE

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

5424 Deerbrooke Creek Cr Apt. 6 Tampa Florida 33624

#### ARTICLE III SHARES

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

(100) one hundred shares of one dollar (\$1.00) par value common stock, which shall be designated "COMMON STOCK".

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Leila F. Mnassa 5424 Deerbrooke Creek Cr Apt. 6 Tampa Florida 33624

#### ARTICLE V INCORPORATOR(S)

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

Leila F. Mnassa 5424 Deerbrooke Creek Cr Apt. 6 Tampa Florida 33624 President

27th_	day of _	April	2000	 - P	
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		Si	ignature		

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.

1.	The name of the corporation is:	Mobility America, Inc.	
2.	The name and address of the registered age	SECRETARY OF STATALLAHASSEE, FLOR	
	Leila F. Mnassa		
	(Name)	1DA 39	
	5424 Deerbrooke Creek Cr	Apt. 6	
	(P.O.BOX "not" accep		
	Tampa Florida 33624	<i>t</i>	
	(City/State/Zip)		-

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in the 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.

	 April 27, 200
Signature	Date