

00 AUG -7 AM 9: 24

SECRETARY OF STATE . TALLAHASSEE, FLORIDA

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

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SUBJECT:	AIR PLUS RESIDENTIAL SERVICES, INC.  (Proposed corporate name - must include suffix)						
Enclosed is an orig	inal and one(1) copy o	f the article	es of incorporati	ion and a c	heck for :		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certific		□\$122.50 Filing Fee & Certified		☐ \$131.25 Filing Fee, Certified Copy & Certificate		
			ADDITIO	NAL CO	PY REQUIRED		
FROM:	Hal J. Bridge	e s					
	N	ame (Printe	d or typed)				
	6560 82nd Ave	. N.					
Address							
Pinellas Park, FL 33781  City, State & Zip							

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

Daytime Telephone number

of the articles.

## ARTICLES OF INCORPORATION

FILED

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business, FLORIDA Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

AIR PLUS RESIDENTIAL SERVICES, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

AIR PLUS RESIDENTIAL SERVICES, INC.

6560 82nd Ave. N.

Pinellas Park, FL 33781

#### ARTICLE III SHARES

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

One Thousand Shares Of Common Stock With A Par Value Of

One Dollar Per Share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Hal J. Bridges

6560 82nd Ave. N.

Pinellas Park, FL 33781

## ARTICLE V INCORPORATOR(S)

## See instructions for officers/directors

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

Hal J, Bridges 6560 82nd Ave. N Pinellas Park, Fl 33781

The undersig	ned incorporator(s) ha	as(have) executed these Ar	ticles of Incorporation thi
<u>27th</u> <b>da</b> y	of July	, 2000	•
(An additiona	article must be adde	d if an effective date is req	uested.)
	HALS	John Brugs Signature	fi.
		Signature	
		Signature	

## Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

FILED

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE SECRETARY OF STATE TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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_	AIR PLUS RESIDENTIA	L SERVICES, INC.
	_		
2.	The name and address of the reg	istered agent and office is:	
		Hal J. Bridges	
		(NAME)	
		6560 82nd Ave. N.	
	(P. O.	Box or Mail Drop Box NOT ACCI	EPTABLE)
	•	Pinellas Park, FL 3	33781
		(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 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) (DATE)