PASSAN 89623

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

SUBJECT:	FINZYK LENNIZ DELLIGEZ		<u> </u>
	(Proposed corpor	ate name - must include suf	fix)
			:00003399025! -09/20/0001039008 ****131.25 *****87.5
Enclosed is an ori	ginal and one(1) copy of the articles	s of incorporation and a	check for:
☐ \$70.00 Filing Fee		□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FRO	M: Tom Husak Name (Pr	rinted or typed)	TALL SECT
8175 Mystic Harbor Circle			
		Address	FILED PH 2: 14 SECRETARY OF STATE FALLAHASSEE, FLORIS
	City,	State & Zip	<u> </u>
	561 - 715 - 5602 Daytime T	elephone number	

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

9.21

ARTICLES OF INCORPORATION

The undersigned incorporator,	for the purpose of for	ming a corporation unde	r the Florida
Business Corporation Act, her	eby adopts the following	ng Articles of Incorporati	on.

Business Corporation Act, hereby adopts the Jollowing Articles of the	icorporation.
ARTICLE I NAME	The second second
The name of the corporation shall be:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
HUSAK TENNIS SErvices, Inc.	The state of the s
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this cor 8175 Mystic Harbor Circle	poration shall be:
BOYNTON BEACH, F. 33436	·
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorize	ed to have outstanding at any one time is:
100	
(ODE HUDORED)	
ARTICLE IV INITIAL REGISTERED AGENT	
The name and Florida street address of the initial registered ag	
TOM HUSAK 8175 MYSTIC HARBOR CITCLE BOYNTON BEACH, F. 33436	
ARTICLE V INCORPORATOR	.
The name and address of the incorporator to these Articles o	f Incorporation are:
TOM HUSAK	
TOM HUSAK BITS MYSTIC HAVBOR CIVCLE BOYNDON BEACH, TO 33436	
Je P. Me	9/18/00
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 j certificate, I hereby accept the appointment as registered agent and agree provisions of all statutes relating to the proper and complete perform obligations of my position as registered agent	ee to act in this capacity. I further agree to comply with the
SLRIAL	9/18/00
Signature/Registered Agent	Date