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TRANSMITTAL LETTER

Department of State Division of Corporatio P. O. Box 6327 Tallahassee, FL 32314	.		SECRETARY OF STATE TALLAHASSEE, FLORIDA	00 KOV 13 PM 4: 25
SUBJECT:	Your Choice Service	e, Inc.		 -
	(PROPOSED CORPORAT	E NAME – <u>MUST INCLL</u>	JDE SUFFLX)	
			5000034 -11/02/0 *****78	DO01053
Enclosed is an original	and one(1) copy of the article	es of incorporation and a	check for:	
S70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	of
FROM:	#1 Service, Inc.	inted or typed)		
	6818 - 10th Aven			
	A	Address	<u> </u>	·
	St. Petersburg, I	•		
	City,	State & Zip	· 	
	727-343-7277			

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

Daytime Telephone number

CB 11-15



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 3, 2000

MICHAEL CUMMINGS 6818 10TH AVE N ST PETERSBURG, FL 33710

SUBJECT: #1 SERVICE, INC. Ref. Number: W00000026446

We have received your document for #1 SERVICE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document is being returned as requested.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6925.

Cynthia Blalock Document Specialist

Letter Number: 600A00057216

ARTICLES OF INCORPORATION

BONN 13 PA

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:

Your Choice Service, Inc.

ARTICLE II PRINCIPAL OFFICE

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

6818 - 10th Avenue North St. Petersburg, FL 33710

ARTICLE III SHARES

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

100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michael Cummings 6818 - 10th Avenue North St. Petersburg, FL 33710

ARTICLE V INCORPORATOR(S)

The	name(s)	and street	address(es)	of the	incorporator	(s) to	these	Articles	at inc	corpora-
tion	is(are):									

Michael Cummings - President
6818 - 10th Avenue North
St. Petersburg, FL 33710 —

Sharon Cummings - Vice President, Secretary, Treasurer 6818 - 10th Avenue North St. Petersburg, FL 33710

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

30th	day of	· October		00
	that (6		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
<u></u>	MINON	Signature	1	 -
i.		•		
<u> </u>		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	e of the corp	oration is:	Your Choice	Service,	Inc.		<u> </u>	
2.	The name	and addres		stered agent ar	nd office is	•	TA		
	• •	-	Michael Cu	(Name) h Avenue North	, .		ECRETAI	DO NOV 1	<u> </u>
	-		(P.O.	Box <u>not</u> acceptab burg , FL 3371 City/State/Zip)	ie)		RY OF STATE	3 PM 4: 26	

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 or my duties, and I am familiar with and accept the obligations of my position as registered agent.

Thickey (Signature) (Signature)