Req	quester's Name	
NSS/SCA 1000 NW 1	onado (305)381-7000 14th Street	400003718984- -02/19/01011290
Miami, FL	33136 one #	*****78.75 *****?
		Office Use Only

2(Corporation Name) 3(Corporation Name)	(Document #) (Document #)	FILED I FEB 19 PM 12: 22 SECRETARY OF STATE ALLAHASSEE
4 (Corporation Name)	(Document #)	
Walk in Pick up time		у
Mail out Will wait	Photocopy Certificate of	Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS	REGISTRATION/QUALIFICATION	-
 Annual Report Fictitious Name 	 Foreign Limited Partnership Reinstatement Trademark Other F. CHESSER Examiner's Interview 	3 2 0 2000 V
	Examiner S III	

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. ARTICLE I NAME

The name of the corporation shall be:

All About Bail Bonds Inc.

ARTICLE II PRINCIPAL OFFICE

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

1000 NW 14th St., Miami FL 33136

ARTICLE III SHARES

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

1,000 Shares

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

Donna Holman C.P.A 4960 SW 72nd Ave., Suite 304 Miami, Florida 33155

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

> Blair Foster 1000 NW 14th St., Miami FL 33136

Signature/Incorporator

2/13/01

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

Della Helin CPA

Signature/Registered Agent

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