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Florida Department of State
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From:
Account Name : SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A.
Account Number : I19990000058
Phone : (954) 753-6042
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FLORIDA PROFIT CORPORATION OR P.A.

LMT II SERVICES, INC.

Certificate of Status	1
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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION
OF

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE ONE

NAME

The name of the corporation shall be:
LMT II SERVICES, INC.

ARTICLE TWO

PRINCIPAL OFFICE

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

7491 N. Federal Hwy. #263 C-5
Boca Raton, Fl 33487

SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A.
9690 W. Sample Road SUITE 202
CORAL SPRINGS, FL 33065
(954) 753-2222

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ARTICLE THREE

CAPITAL STOCK

The number of shares of stock that this Corporation is authorized to have outstanding at one time is one thousand shares of common stock with a par value of one dollar.

ARTICLE FOUR

INITIAL REGISTERED AGENT & ADDRESS

The name and address of the initial registered agent is:

Frank Scalabrino
7491 N. Federal Hwy. #263 C-5
Boca Raton, FL 33487

ARTICLE FIVE

INCORPORATOR

The name and address of the Incorporator is:

Frank Scalabrino
7491 N. Federal Hwy #263 C-5
Boca Raton, FL 33487

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The undersigned has executed these Articles of
Incorporation. This 5th day of March.

Signature: X Frank ScalabrinoDate: 3-5-01

CERTIFICATE OF DESIGNATED REGISTERED AGENT

Pursuant to the provisions of section 607.0501 Florida
Statutes, the Undersigned Corporation, under the Laws of the
State of Florida submits to the following statement
designating the registered agent in the State of Florida.

1. The name of the corporation is:
LMT II Services, Inc.
2. The name and address of the registered agent
Frank Scalabrino
7491 N. Federal Hwy. #263 C-5
Boca Raton, FL 33487

Signature: X Frank ScalabrinoDate: 3-5-01

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Having been named as the Registered Agent and to accept service of process for the above stated corporation at the place designated in this Certificate, I accept the appointment as Registered Agent and agree to comply with the provisions of all the 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: X *Paula Secler*Date: 3-5-01

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