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Florida Department of State

Division of Corporations

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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : AL CLARK  
Account Number : 072100000173  
Phone : (727) 398-6011  
Fax Number : (727) 397-5189

FLORIDA PROFIT CORPORATION OR P.A.

ALTERNATIVE BUSINESS MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

FILED  
01 APR 10 PM 4:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION**

In compliance with Chapter 607/617.0501 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

**ALTERNATIVE BUSINESS MANAGEMENT, INC.****ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

**51 SOUTH MAIN AVENUE****SUITE 309****CLEARWATER, FL. 33765****ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**FOR PROFIT****ARTICLE IV SHARES**

The number of shares of stock is:

**1000****ARTICLE V INITIAL OFFICERS/DIRECTORS (OPTIONAL)**

The name(s) and address(es):

**LUTZ WALLEM (TREASURER )****DON CLOUGH ( PRESIDENT )****VICTOR AZAR ( V. PRESIDENT )****51 SOUTH MAIN AVENUE****SUITE 309****CLEARWATER, FL. 33765****ARTICLE VI REGISTERED AGENT**The name and Florida address of the registered agent is:**ACCOUNTING & TAX HELP, INC.****8668 PARK BLVD.****SUITE A****SEMINOLE, FL. 33777****ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:**LUTZ WALLEM****51 SOUTH MAIN AVENUE****SUITE 309****CLEARWATER, FL. 33765**

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*

Al Clark

Signature/Registered agent

X Lutz Wallem

Signature/ Incorporator

4-10-01

Date

4-10-01

Date

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