FILED

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

01 MAY 23 PM 3: 47

SECRE, PT SESTATE TALLAHASSEE, FLORIDA

SUBJECT: \(\frac{1}{2}\)	(PROPOSED CORPORA	TE NAME - MUST INCL	S, TNC.			
		A STATE OF THE STATE OF T	80090430 -05/23707 *****87.5	2558——6 701088—008) *****87.50		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:						
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED			
FROM:	`	AOCCO rinted or typed)				
	23392 Olde Me	Adew brook	Circle			
•	Bonita Spa	IMAS FL	34134			
	941 498 8 Davime T	S9 68	<u> </u>	· . <u>·</u> · · 		

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

MRTICLES OF INCORPO In compliance with Chapter 607 at			
ARTICLE I NAME The name of the corporation shall be		nt Service	s, Inc.
ARTICLE II PRINCIPAL The principal place of business/mai		dowbrook C	ircle
ARTICLE III PURPOSE The purpose for which the corpora			Achines
ARTICLE IV SHARES The number of shares of stock is:	100		OJ M
ARTICLE V INITIAL OFF. The name(s) and address(es): Kathleen A. Ru			OT MAY 23 PM 3: W7 SECHELANASSEE, FLORID TALLANASSEE, FLORID
David Ryacca	- Vice PR JEAdowbRook (155 FL. 34134	e.e.ident	3: 47 STATE FLORIDA
The name and Florida street addr	RED AGENT ress of the registered agent is:		
ARTICLE VII INCORPOR		H	
The name and address of the Income David Rusces 23392 Olde Me	adoubRook Cir	ecle u	
**************************************	accept service of process for the above	********************* e stated corporation at the pla	
Signature/Registered Agent	and .	Date	101
Signature/Incorporator	res	Date	101