

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

000004465120--6 -07/09/01--01101--016 *****70.00 *****70.00

All SERVICE

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00

□ \$78.75

Filing Fee

Filing Fee

& Certificate

□ \$122.50

Filing Fee

& Certified Copy

□ \$131.25

Filing Fee. Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Ron Wilborn

Name (Printed of typed)

NEW YORK

Address

W MELBOURNE, 72

City, State & Zip

722-6094

Daytime Telephone number

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

ARTICLES OF INCORPORATION

1. The name of the corporation shall be: A	11 SERVICE	Repairs	INC	
2. The principal place of business and mailing	g address of the o	corporation is:		
2072 NEW YORK STREET,	WEST M	Elbourne	<u>, 72 37</u>	१९०५
3. The corporation shall have the authority of				
4. The registered agent of the corporation is registered street address is 2072 NEW Florida 32904 .	ROW WILL YORK S	barn Treet, u). ME16	and the
5. The initial Board of Directors shall have is/are as follows: Ron Wilborn 2072 NEW YORK ST, u	· · · · · · · · · · · · · · · · · · ·			
The number of directors may be raised corporation but shall in no case be less than	one.	•	the bylaws	of the
6. The incorporator of this corporation is street address is 2072 New York	ST: (1)	Mrlborn Mrlboue	05 20	whose
Dated 7-5-0/	<u>J</u> Incorporator	· See-	SECRETARY OF FORID TALLAHASSEE, FLORID	
Having been named as registered agent and t	o accept service	of process for	the above	stated
corporation at the place designated in this cer	tificate, I hereby	accept the ap	pointment	as reg-

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 am familiar with and accept the obligations of my position as registered agent.

Dated 7-5-01

Registered Agent



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

000004465120--6 -07/03/01--01101--016 ******70.00 ******70.00

SUBJECT: All SERVICE Repairs INC

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

№ \$70.00

□ \$78.75

Filing Fee Filing Fee

& Certificate

□ \$122.50

Filing Fee

& Certified Copy

□ \$131.25 Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Ron Wilborn

Name (Printed of typed)

2072 NEW YORK ST.

Address

W MElbournE, 72 32904

City, State & Zip

722-6094

Daytime Telephone number

TILED JUL-9 PM 1:1

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

03/7/12

ARTICLES OF INCORPORATION

1.	The name of the corporation shall be: HI SERVICE REPAIRS INC.
2.	The principal place of business and mailing address of the corporation is:
ح —	The composition shall have the outlesite to in a 500
٥.	The corporation shall have the authority to issue shares of stock.
reg	The registered agent of the corporation is Row Wilborn and the gistered street address is 2072 NEW YORK STREET, W. MEIBOURNS
Flo	orida <u>32964</u> .
	The initial Board of Directors shall have member(s) whose name(s) and address(es) /are as follows: Ron Wilborn 2072 NEW YORK ST , w. MEIBOURNE, 72 32904
6.	The number of directors may be raised or lowered by amendment of the bylaws of the prporation but shall in no case be less than one. The incorporator of this corporation is Ron Wilborn whose reet address is 2072 New York ST., W. Melbourne, 71 3290
	Dated 7-5-01 Dated 7-5-01 Dated 7-5-01 Incorporator
co: ist of	aving been named as registered agent and to accept service of process for the above stated or poration at the place designated in this certificate, I hereby accept the appointment as regtered agent and agree to act in this capacity. I further agree to comply with the provisions all statutes relating to the proper and complete performance of my duties, and am familiar ith and accept the obligations of my position as registered agent.
	Dated 7-5-01

Registered Agent

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