MINOSON TRANSMITTAL LETTER

OI AUG -3 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

000004514240--3 -08/03/01--01066--013 *****131.25 *****87.50

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: j \$70.00 \$78.75 \$122.50 XI\$131.25 Filing Fee Filing Fee Filing Fee & Certified Copy & Certificate Certified Copy & Certificate Additional Copy Required FROM: - 330- 6305

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

Daytime Telephone number

ARTICLES OF INCORPORATION

OI AUG-3 PM 3: 08

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

ARTICLE I NAME

The name of the corporation shall be: A. A. A. HANDYMAN SERVICES IMC

ARTICLE II PRINCIPAL OFFICE

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

272/ ZURNO WAY.

DELRAY BEACH, FLORIDA, 33445

ARTICLE III SHARES

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

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

STEVE GABAY.

2721 ZORNO WAY.

DELRAY BEACH, FLORIDA, 33445

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

STEVE GABAY 2721 ZORNO WAY DELPAY BEACH, FL 33445

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24 day of July Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, WHE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

		A V V 1/1.
1.	The name of the corporation is:	A. A. A. HANDYMAN SERVICES INC

2. The name and address of the registered agent and office is:

STEYE GADAY

(NAME)

2721 ZORNO INAY

(P.O. BOX OF Mail Drop BOX NOT ACCEPTABLE)

DELRAY BEACL FL 33445

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.

X John (SIGNATURE) 7/24/200/
(DATE)