

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

SUBJECT: BRANDI D. ABBROSINO, 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 Filing Fee

□\$78.75

Filing Fee & Certificate of Status □ \$ 78.75

Filing Fee & Certified Copy □ \$ 87.50

Filing Fee & Certified Copy & Certificate Status

FROM:

BRANDI D. AMBROSINO

Name (printed or typed)

7311 SANDALWOOD DR.

(Address)

PORT RICHEY, FL 34668

(City/State//Zip)

(727) 842-2582

(Day time telephone number)

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*****70.00 *****70.00

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NOTE: Please provide the original and one (1) copy of the Articles

DIVISION OF CORPORATIONS, P.O. BOX 6327 TALLAHASSEE, FL 32314

ARTICLES OF INCORPORATION

OF

FILED

01 AUG 24 PM 1: 35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BRANDI D. AMBROSINO, INC.

The undersigned incorporation (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:

BRANDI D. AMBROSINO, INC.

ARTICLE II PRINCIPAL OFFICE

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

7311 SANDALWOOD DR. PORT RICHEY, FL 34668-5749

ARTICLE III

CAPITAL STOCK

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

1000 SHARES NON-PAR

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JAMES H. COLLIER, SR. 9110 STERLING LANE PORT RICHEY, FL 34668

ARTICLE V INCORPORATOR(S)

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

BRANDI D. AMBROSINO 7311 SANDALWOOD DR. PORT RICHEY, FL 34668-5749 (PRESIDENT)

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

21 ST DAY OF AUGUST 2001
Mandi ad Mandos P_ Signature/Title
V-PSignature/Title
SECSignature/Title
Signature/Title
Signature/Title

CERTIFICATE OF DESIGNATION OF

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUATES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	.
BRANDI D. AMBROSINO, INC.	
The name and address of the registered agent and office is:	FIL 01 AUG 24 SECRETARY TALLAHASSE
JAMES H. COLLIER SR(Name)	LED 24 PN 1: 36 Y OF STATE SEE, FLORIDA
9110 STERLING LANE (P. O. Box not acceptable)	0A 36
PORT RICHEY, FL 34668	

I have been named as registered agent and to accept service of process for the aboved 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.

(Signature) (Date)

(City/State/Zip)