TRANS/ITTALEDEN 000113634

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

Subject	
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Lake Well and Service, Inc.

Enclosed is an original and two (2) copies of the articles of incorporation and a check for

\$78.75
Filing Fee
& Certified Copy

\$122.50 Filing Fee & Certified Copy

Filing Fee, Certified Copy

\$131.25

(ADDT'L COPY REQ'D)

& Certificate (ADDT'L COPY REQ'D)

FROM:	Nellie Akalp
-	30141 Agoura Road, Suite 205
	Agoura Hills, California 91301

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SECRETARY OF STATE
OALL AHASSET FLORIDA

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

ARTICLES OF INCORPORATION Lake Well and Service, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

The name of the Corporation shall be: Lake Well and Service, Inc.

PRINCIPAL OFFICE

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

1221 West Main Street Leesburg, Florida 34748

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1,500 at \$1.00 par value per share.

ARTICLE IV INITIAL DIRECTORS

The name(s) and address(s) of the initial Director(s) is/are:

Joseph Ball 1221 West Main Street Leesburg, Florida 34748

Linda Ball 1221 West Main Street Leesburg, Florida 34748

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent is:

Joseph Ball 1221 West Main Street Leesburg, Florida 34748

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Nellie Akalp

30141 Agoura Road, Suite 205 Agoura Hills, California 91301

Nellie Akalb, Incorporator

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.

Registered Agent