PRAISMHADETER) 1/4573

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

\$70.00

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*****87.50 *****87.50

× \$87.50

SUBJECT: Alpha Air Conditioning & Appliances Inc.

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

□ \$78.75

Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Co & Certificat Status PY REQUIRE	te of	
FROM:	Barbara A. 1 Name (Pi 5186 N.W. 52	Wilson rinted or typed) 7 Stropt		SECRETARY TALLAHASSE	FI
	Coconut Cre	Address	-3	RY OF STATE SEE, FLORIDA	
	964-418- Daytime T	0490 elephone number		•	

\$78.75

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

PS 14/91.

The number of shares of stock is: COO ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Barbara Wilson Mattlewandowski, V. P. 7667 West Sample Road Swite 170 Coral Springs, F. 32065 Coral Springs, F. 33065 ARTICLE VI REGISTERED AGENT	ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 62		FILED
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name and Florida street address of the registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this capacity The name and agree to acc in this capacity The familiar with and accept the appointment as registered agent and agree to act in this capacity The principal place of business in this capacity The principal place of business in this capacity The principal place of business in the place designated in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this capacity The principal place of business in the place designated in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this capacity The principal place of business is: The	ARTICLE I NAME		01 NOV 30 PM 2: 0
The principal place of business/mailing address is: The T.W. Sample Road, Suite 170 Coral Aprings, FL. 33065 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Air Conditioning Service ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Parbara Wilson Tols T. West Sample Road July 170 Coral Springs, FL. 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Barbara A. Wilson 5186 n.W. 53 Street Coconul Ville Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Droporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this capacity II] 2701	The name of the corporation shall be:		TALLAHASSE OF STATE
The principal place of business/mailing address is: The T.W. Sample Road, Suite 170 Coral Aprings, FL. 33065 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Air Conditioning Service ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Parbara Wilson Tols T. West Sample Road July 170 Coral Springs, FL. 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Barbara A. Wilson 5186 n.W. 53 Street Coconul Ville Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Droporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The name and registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I app familiar with and accept the appointment as registered agent and agree to act in this capacity II] 2701	Alpha Air Condition	oning & Appli	ances Ince, Florio
Coral Springs, FL 33045 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Air Conditioning Service ARTICLE IV SHARES The number of shares of stock is: (OO) ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Barbara Wilson Mattlewandowski, V. P. 7667 West Sample Road Guite 170 Goral Springs, FL 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Barbara A. Wilson 5186 Nw 33013 The name and address of the Incorporator is: Barbara Wilson 7667 West Sample Road Suite 170 Coral Springs, FL 33045 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Barbara Wilson 7667 West Sample Road Suite 170 Coral Springs FL 33045 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Barbara Wilson 7667 Food Suite 170 Coral Springs FL 33045 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Barbara Wilson 7667 Food Suite 170 West Sample Road Suite 170	ARTICLE II PRINCIPAL OFFICE	W	÷ 1
The purpose for which the corporation is organized is: Air Condition in Service ARTICLE IV SHARES The number of shares of stock is: OO	Coral Springs, FL 3	Road, Suite 330 65	170
Air Conditioning Service ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Parbara Wilson Math Lewandowski, V. P. 1667 West Sample Road Swite 170 Coral Springs, F. 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Barbara A. Wilson 5186 nw 53 Street ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Barbara Wilson The Twest Sample Road Wilson The Tours Sample Road Wilson		d is:	
ARTICLE IV SHARES The number of shares of stock is: CO			•
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The name(s), address(es) and title(s): Barbara Wilson Matt lewandowski, V. P. T1667 West Sample Road Bute 170 Coral Springs, F. 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Barbara A. Wilson 5186 N. W. S. Street COCONUM VILLY, F. 33013 The name and address of the Incorporator is: Barbara Wilson Telo T West Sample Road Suite 170 Coral Springs, FL 33065 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Barbara Wilson Telo T West Sample Road Suite 170 ***********************************		· · · · · · · · · · · · · · · · · · ·	
The name(s), address(es) and title(s): Barbara Wilson Matt lewandowski, V. P. Tob 7 West Sample Road Butte 170 Coral Springs, F. 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Barbara A. Wilson 5186 N.W. 52 Street Oconwy Villy, F. 33013 The name and address of the Incorporator is: Barbara Wilson Teb 7 West Sample Poad Suite 170 (VI O West Sample Poad Suite 170 ***********************************	100		
The name(s), address(es) and title(s): Barbara Wilson Matt lewandowski, V. P. Tob T West Sample Road Butte 170 Coral Springs, F. 33045 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Barbara A. Wilson 5184 nw 52 Street COCONUM INCORPORATOR The name and address of the Incorporator is: Barbara Wilson The name and address of the Incorporator is: Barbara Wilson The Jample Road Suite 170 Colo Jophings. F. 33045 ***********************************	ARTICLE V INITIAL OFFICERS/DIRE	CTORS (optional)	
Coral Springs, M. 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: BUNDARA A. W. 1501 5186 NW 52 Street COCONUT CYLLY FL 33013 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: BUNDARA WILSON The T WEST Sample Food Suite 170 COTAL Springs, FL 33065 ***********************************		-	
Coral Springs, M. 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: BUNDARA A. W. 150n 5186 N.W. 52 Street COCONUT CYCLINER 33013 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: BUNDARA WILSON The T WEST Sample Food Suite 170 COI OF OF Springs, F. 33065 ***********************************	Parbara Wilson	Most leu	vandowski, V. P.
Coral Springs, M. 33065 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: BUNDARA A. W. 1501 5186 NW 52 Street COCONUT CYLLY FL 33013 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: BUNDARA WILSON The T WEST Sample Food Suite 170 COTAL Springs, FL 33065 ***********************************	7667 West Sample Koad	7667 WE	256 Sample Koad
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: BUNDAL A. WILSON 5186 NW 52 Street COCONUT VICK, PL 33013 The name and address of the Incorporator is: BUNDAL WILSON The T WIST Sample Foad Swife 170 COINT Splings, FL 33065 ***********************************		Swith 170	
The name and Florida street address of the registered agent is: Barbara A. Wilson 5186 NW 52 Street Coconut Villy 533013 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Barbara Wilson The T West Sample Hoad Swite 170 Corol Splings F 33065 ***********************************		Coral Spi	rings, the 2005
Barbara A. Wilson 5186 nw 52 Street Coconut Wilk, 513013 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Barbara Wilson The Twest Sample Food, Swite 170 Cold Splings Ft. 33005 *********************************			
Street COCONUL VILL, FL 33013 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Barbara Wilson The T West Sample Hoad, Swite 170 COLOL Splings, FL 33065 ***********************************			
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Bayora Wilson The Twest Saryple Hoad, Swite 170 Corol Splings H 33065 ***********************************		•	
The name and address of the Incorporator is: Barbara Wilson The John Son John Survice Hoad, Swith 170 What Saryple Hoad, Swith 170 What Splings Fl. 33005 *********************************		3	
Barbara Wilson The Twest Sample Hoad, Swite 170 Coral Splings, H. 33005 *********************************	ARTICLE VII INCORPORATOR		
The Twest Sample Hoad, Swite 170 Oral Splings, Fl. 33065 ***********************************			
COVED DUNGS FL 33005 *********************************		d. Swito 170	

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	**************************************	***********	
(DWJson) 11/27/01			
Signature/Registered Agent Date	Mulson		11/27/01
$(\Delta 1)(\Delta 2)$	Signature/Registered Agent		Date
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