

PO 2000021610
TRANSMITTAL LETTER
FILED

02 FEB 22 PM 2:12

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

900004990419--7
-02/22/02--01016--026
*****70.00 *****70.00

SUBJECT: Absolute SDC, 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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Robert M Martin
Name (Printed or typed)

1820 SW Dalmation Ave
Address

Port St Lucie FL 34953
City, State & Zip

561 873 4529
Daytime Telephone number

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

D. WHITE FEB 26 2002
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Absolute SDC, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1820 SW Dalmatian Ave
Port St Lucie, FL 34953

ARTICLE III SHARES

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

10,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

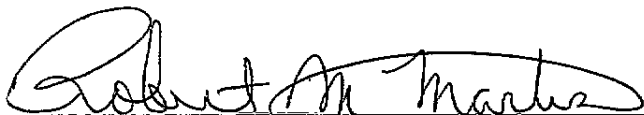
The name and Florida street address of the initial registered agent are:

Robert M Martin
1820 SW Dalmatian Ave
Port St Lucie FL 34953

ARTICLE V INCORPORATOR

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

ROBERT M. MARTIN
1820 SW DALMATION AVE
PORT ST LUCIE, FL 34953

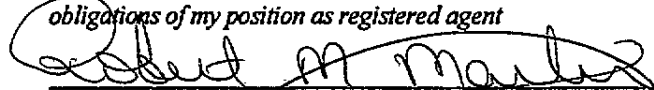


Signature/Incorporator

1/30/02
Date

(An additional article must be added if an effective date is requested.)

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



Signature/Registered Agent

1/30/02
Date