

PD2000045762

TRANSMITTAL LETTER

02 APR 26 AM 8:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: ABCO Services 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

☐ ^{78.75}~~\$122.50~~
Filing Fee
& Certified Copy

☐ ^{87.50}~~\$131.25~~
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

Sherryll A. Martin

Name (printed or typed)

3945 KAMENA COURT

Address

BOYNTON BEACH, FL 33436

City, State & Zip

561-740-9592

Daytime Telephone number

600005358036--5

-04/26/02--01024--001

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

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

Payable
4/26/02
4

APPROVED
AND
FILED

ARTICLES OF INCORPORATION

12 APR 26 AM 8:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

ABCO Services Inc.

ARTICLE II PRINCIPAL OFFICE

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

*3945 KAMEHA CT.
BOYNTON BEACH, FL 33436*

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Sheryll A. Martin
3945 KAMEHA CT.
BOYNTON BEACH, FL 33436*

FILING FEE: \$70.00

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):

Sheryll A. Martin
3945 KAMENA CT.
BOYNTON BEACH, FL 33436

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

25th day of April, 18 2002

Sheryll A. Martin
Signature

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, THE 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.

1. The name of the corporation is: ABCO Services Inc.

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

Sheryll A. Martin
(NAME)

3945 KAMENA CT.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BOYNTON BEACH, FL 33436
(CITY/STATE/ZIP)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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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.

Sheryll A. Martin
(SIGNATURE)

4/25/02
(DATE)

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