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(Requestor's Name)

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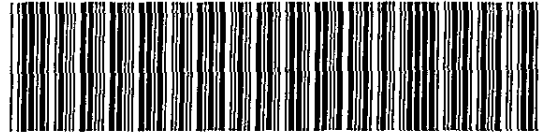
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08/3/00

TRANSMITTAL LETTER

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

SUBJECT: 1ST CHOICE EMERGENCY SERVICES, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status

ADDITIONAL COPY REQUIRED

FROM: T 1/2 V Multiservices, Inc.
Name (Printed or typed)

2953 Foresthill Blvd, #A
Address

W.P.B, FL 33406
City, State & Zip

(561) 967-6666
Daytime Telephone number

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

ARTICLES OF INCORPORATION

OF

1ST CHOICE EMERGENCY SERVICES, INC.

The undersigned, for the purpose of forming a corporation for profit under the laws of the State of Florida, hereby adopt the following Articles of Incorporation:

ARTICLE I

The name of this Corporation shall be 1ST CHOICE EMERGENCY SERVICES, INC.

ARTICLE II

DURATION

This Corporation shall have perpetual existence unless dissolved pursuant to law and shall commence business as of the date of filing of these Articles of Incorporation.

ARTICLE III

GENERAL NATURE OF BUSINESS

This corporation may engage in any activity of business permitted under the laws of the State of Florida; said corporation's primary purpose shall be to engage water restoration for fires and floods.

ARTICLE IV

CAPITAL STOCK

This Corporation is authorized to issue 1000 shares of \$1.00 par value common stock,

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TALLAHASSEE, FLORIDA

as follows: Hundred percent (100%) of the stock to be owned by Paola A. Del Valle (President).

**ARTICLE V
PRINCIPAL PLACE OF BUSINESS**


The principal place of business of this Corporation is: 1695 Wood Bend Road,
West Palm Beach, Fl. 33406 with the privilege of having branch offices at other places within or
without the State of Florida.

**ARTICLE VI
OFFICERS AND DIRECTORS**

The names and post office address of the initial officers and directors who shall hold
office for the first year of the corporation's existence or until their successors are elected are:
Paola A. Del Valle (President) 1695 Wood Bend Road, West Palm Beach, Florida 33406.

**ARTICLE VII
INCORPORATOR**

The name and address of the person signing these Articles is:



Paola A. Del Valle
1695 Wood Bend Road
West Palm Beach, Florida 33406

**ARTICLE VIII
REGISTERED OFFICE AND REGISTERED AGENT**

The name of the registered agent and the street address of the initial registered office
of this Corporation is:

Paola A. Del Valle
1695 Wood Bend Road
West Palm Beach, Florida 33406

ARTICLE IX
BY-LAWS

The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors and shareholders.

ARTICLE X
AMENDMENTS

This Corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation or any Amendment hereto and any right conferred upon the Stockholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned, being the original incorporator to the Articles of Incorporation herein, for the purpose of forming a corporation to do business both within and without the State of Florida, under the laws of Florida, do make and file these Articles, hereby declaring and certifying that the facts herein stated are true, this 17 day of March, 2003

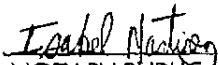

Paola A. Del Valle

STATE OF FLORIDA)

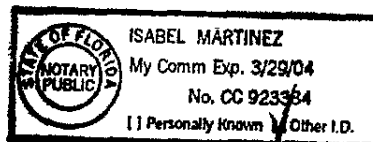
COUNTY OF PALM BEACH)

BEFORE ME, the undersigned authority, personally appeared PAOLA A. DEL VALLE, Who after being first duly sworn, deposes and states, that They signed the foregoing Articles of Incorporation for the purposes stated therein expressed.

WITNESS my hand and official seal at the State and County aforesaid, this 17th day of March, 2003.


NOTARY PUBLIC

My commission expires:



CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 designation the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: 1ST CHOICE EMERGENCY SERVICES, INC.
2. The name and address of the registered agent and office is:

Paola A. Del Valle
1695 Wood Bend Road
West Palm Beach, Florida 33406

I HAVE 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.



Paola A. Del Valle / REGISTERED AGENT