# P0300006620S

| (Requestor's Name)   |  |  |  |  |
|--|--|--|--|--|
| (Address)  |  |  |  |  |
| (Address)  |  |  |  |  |
| (City/State/Zip/Phone #)                                   |  |  |  |  |
| PICK-UP WAIT MAIL  |  |  |  |  |
| (Business Entity Name)                                     |  |  |  |  |
| (Document Number)  |  |  |  |  |
| Certified Copies Certificates of Status                    |  |  |  |  |
| Special Instructions to Filing Officer:                    |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Office Use Only  |  |  |  |  |
| Linda Abroms GAVEN   |  |  |  |  |
| AUTHORIZATION BY PHONE TO  CORRECT R.A. a ddress of Art. V |  |  |  |  |
| DATE 6-16-03   |  |  |  |  |
| DOC EVAN   |  |  |  |  |



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# TRANSMITTAL LETTER

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

| SUBJECT: Abrai      | ms-Dresel Group, Inc.                      |  |   |
|---------------------|--|--|---|
|                     | (PROPOSED CORPORA                          | ATE NAME – <u>MUST INCL</u>                        | UDE SUFFIX)   |
| Enclosed are an ori | ginal and one (1) copy of the ar           | ticles of incorporation and                        | d a check for:  |
| \$70.00 Filing Fee  | \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED |
| FROM:               | Jan Dresel                                 | e (Printed or typed)                               |   |
|                     | PO Box 66895                               | Address  |   |
|                     | St. Pete Beach, FL 33736                   | , State & Zip                                      |   |
|                     | (727) 391-7625 or (727) 68                 | -<br>36-2378                                       |   |

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

Daytime Telephone number

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

Abrams-Dresel Group, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

13799 Park Blvd North #241 Seminole, FL 33776

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful business purpose.

#### ARTICLE IV SHARES

The number of shares of stock is:

Ten Million (10,000,000)

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

president/birector

Alan Dressel, PO Box 66895, St. Pete Beach, FL 33736

LINDA ABRAMS (Vice fres. / oirector 13799 PARK BLVD. NORTH, #241 SEMINOLE, FL. 33776

# ARTICLE VI <u>REGISTERED AGENT</u>

The <u>name and Florida street address</u> of the registered agent is:

LINDA ABRAMS 13799 PARK BLVD. NORTH, #241 SEMINOLE, FL. 33776

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Jan Dressel, PO Box 66895, St. Pete Beach, FL 33736

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporator

June 10, 2003 Date JUNE 10. LOOS