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CORPORATION NAME(S) &	DOCUMENT NUMBER(S) (if known):
1. SAM'S SER	VICES INC.
(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3.	
(Corporation Name)	(Document #)
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OTHER FILINGS	REGISTRATION/
Annual Report	QUALIFICATION
Fictitious Name	Foreign
Name Reservation	Limited Partnership
	Reinstatement
	Trademark

CR2E031(9/92)

Other

Examiner's Initials

ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a FALLAHASSEE FLORIDA the following Articles of incorporation.

ARTICLE I .- NAME

The name of the corporation shall be:

SAM'S SERVICES INC.

### ARTICLE II - PRINCIPAL OFFICE

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

9754 NW 127 Terrace Hialeah

Hialeah Gardens Fl. 33018

### ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

### ARTICLES IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Samuel Medina

9754 NW 127 Terrace Hialeah Gardens Fl. 33018

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SECRETARY OF STATE
TALLAHASSEF FLORIDA

# ARTICLE V - INCORPORATOR

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

Samuel Medina-9754 NW 127 Terrace Hialeah Gardens Fl. 33018

The undersigned incorporator has executed these Articles of Incorporation this 15 day of JULY 2003

ARTICLE VI-DIRECTOR(S)

ignature

The name(s) and street address(es) of the director(s) to these Articles of Incorporation is (are):

Samuel Medina President 9754 NW 127 Terrace Hideah Gardens FL. 83018

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature