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## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone: (305)634-3694

Fax Number : (305)633-9696

ARY OF STATE

FLORIDA PROFIT CORPORATION OR P.A.

alpine services of broward, inc.

Certificate of Status	0
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Comporate Filing

Public Access Help

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:

ALPINE SERVICES OF BROWARD, INC.

ARTICLE II PRINCIPAL OFFICE

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

ALPINE SERVICES OF BROWARD, INC. 676 WEST PROSPECT ROAD BT. LAUDERDALE, FL 33309 ARTICLE III CAPITAL STOCK

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

500 SHARES & \$1.00 PAR VALUE

ARTICLE IV INITIAL RECISTERED AGENT AND ADDRESS

The name and address of the registered agent is:

ROBERT WARNER

676 WEST PROSPECT ROAD

FT. LAUDERDALE, FL 33309

ARTICLE V INCORPORATOR (S)

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

ROBERT WARNER 676 WEST PROSPECT ROAD FT. LAUDERDALE, EL 3330

The undersigned has (have) executed these Articles of Incorporation this 12TH day of November, 2003. / /

SIGNATURE & TITLE

DATE

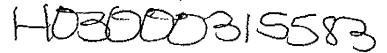
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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

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.

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

ROBNERT WARNER, 676 WEST PROSPECT ROAD, FT. LAUDERDALE, FL 33309

COMPORE WWW.

(COMPORTOR OFFICER)

TITLE POM

DATE //// 03

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE NAMED 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 PREFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SICNATURE

DATE

RETARY OF STATE AHASSEE, FLORID NOV 10 MM R:

Maryraises