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FLORIDA PROFIT CORPORATION OR P.A.

Allied Professional Resources Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
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Corporate Filing

Public Access Help

Handwritten signature/initials

ARTICLES OF INCORPORATION

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:

Allied Professional Resources Inc.

ARTICLE II PRINCIPAL OFFICE

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

Allied Professional Resources Inc.

**67 Village Drive
Ormond Beach, FL 32174**

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ARTICLE III SHARES

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

600,000 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**Scott White
67 Village Drive
Ormond Beach, FL 32174**

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

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

**Scott White - President
67 Village Drive
Ormond Beach, FL 32174**

ARTICLES VI INCORPORATOR(S)

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

**Scott White
67 Village Drive
Ormond Beach, FL 32174**

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

2nd day of February 2004.

A handwritten signature in black ink, appearing to read 'S. White', written over a horizontal line.

Scott White - Signature

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 THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: **Allied Professional Resources Inc.**

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

Scott White

Name

67 Village Drive

(P.O. Box or Mail Drop Box NOT Acceptable)

Ormond Beach, FL 32174

(City / State / Zip)

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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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.



Scott White
SIGNATURE

February 2, 2004

(Date)