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FLORIDA PROFIT CORPORATION OR P.A.

Phillips and Associates Handyman Services Inc.

Certificate of Status	1
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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:

Phillips and Associates Handyman Services Inc.

ARTICLE II PRINCIPAL OFFICE

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

Phillips and Associates Handyman Services Inc. 1737 Hansen Street Sarasota, FL 34231 SECRETARY OF STATE CHYISION OF CORPERATIONS

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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:

1,000 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

Chad Phillips 5855 Midnight Pass Road Sarasota, FL 34242

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):

Chad Phillips - President 5855 Midnight Pass Road Sarasota, FL 34242

ARTICLES VI INCORPORATOR(S)

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

Chad Phillips 5855 Midnight Pass Road Sarasota, FL 34242

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

11th day of February 2004.

Chad Phillips . Signature

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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:	Phillips and Associates Handyman Ser	vices In
2. The name and address of the regist	tered agent and office is:	
	Chad Phillips	
	Name	~ ~~
	5855 Midnight Pass Road	
	(P.O. Box or Mail Drop Box NOT Acceptable)	_
	Sarasota, FL 34242	
	(Circ ! State / Zin)	

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.

Chad Phillips SIGNATURE February 11, 2004

(Date)

SECRETARY OF STATE
DIVISION OF CORPORATION

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