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(Re	questor's Name)	<u></u> .
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OR who

TRANSMITTAL LETTER

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

SUBJECT: CLEAR	SIGNAL COMMUNICATIONS, II	NC. TE NAME – MUST INCL	MD SHOWA
	(I NOI ODD COM ONA	TE WANTE - MICST INCE	CDESCRIEN)
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	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: KE	LLEN R. BERRYMAN		
	Name	(Printed or typed)	
	1445 TALBOT AVE		
		Address	
	JACKSONVILLE, FL 32205 City,	State & Zip	
	(904) 887-9511 Daytime T	elephone number	

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

ARTICLES OF INCORPORATION

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

DIVISION FILED

04 OCT 28 PM 2: 56

ARTICLE I NAME

The name of the corporation shall be:

CLEAR SIGNAL COMMUNICATIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 387-1 NEW BERLIN RD JACKSONVILLE FL 32218

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CELLULAR TELEPHONE SALES AND RELATED, ETC.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

KELLEN R. BERRYMAN/PRESIDENT 1445 TALBOT AVE JACKSONVILLE FL 32205

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JOE D. JEFFERSON 5412 MORSE AVE JACKSONVILLE FL 32244

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KELLEN R. BERRYMAN 1445 TALBOT AVE JACKSONVILLE, FL 32205

Signature/Incorporator

10/26/2004 Date