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OS HAP -4 PM 3: 25
SECRETARY OF STATE
ALLI AHASSEE, FLORIDA

AND

TRANSMITTAL LETTER

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

SUBJECT:	PROPOSED CORPOR	CTENAME-MUSTINGL	Udesuesix)
Enclosed are an ori	iginal and one (1) copy of the ar	ticles of incorporation an	d ≥ check for:
C \$70.00 Filing Fee		S78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
FROM: _	Earnell A. Sai	(Printed or typed)	
	Po. Box 729-	Address	The field of the supply of the state of the
	Largo, FL. 3	3 779 - 07 2 9 , State & Zip	
	(727) 462-90	015	

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

Daytime Telephone number

AND FILED

ARTICLES OF INCORPORATION

05 HAR -4 PM 3: 25

<u>OF</u>

SECRETARY OF STATE TALLAHASSEE, FLORIDA

EMAE SERVICES, INC.

THE UNDERSIGNED INCORPORATORS, FOR THE PURPOSE OF FORMING A CORPORATION UNDER THE FLORIDA GENERAL CORPORATION ACT IN COMPLIANCE WITH CHAPTER 607 AND/OR CHAPTER 621, FS, HEREBY ADOPTS THE FOLLOWING ARTICLES OF:

ARTICLE I. NAME

THE NAME OF THE CORPORATION SHALL BE: EMAE SERVICES, INC.

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ARTICLE II. PRINCIPLE OFFICE

THE PRINCIPLE PLACE OF BUSINESS OF THIS CORPORATION SHALL BE:

P. O. BOX 729 LARGO, FL 33779

ARTICLE III: PURPOSE

THE PURPOSE OF THIS CORPORATION IS TO ENGAGE IN THE BUSINESS OF REAL ESTATE INVESTING AND CONSULTING. IN CONDUCTING THIS BUSINESS, THE CORPORATION WILL TRANSACT ANY OR ALL LAWFUL ACTIVITIES PERMITTED UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE IV: CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS 100 SHARES AT \$1.00 PAR VALUE PER COMMON STOCK.

ARTICLE V: TERM OF EXISTENCE

THE CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE VI: OFFICERS, DIRECTORS

THE NAMES AND THE STREET ADDRESSES OF THE INITIAL OFFICERS AND DIRECTORS, IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSORS ARE ELCTED ARE:

EARNELL A. SAMUEL DIRECTOR, PRESIDENT 1329 CHESTERFIELD DRIVE CLEARWATER, FL 33756

EARNELL ANTHONY SAMUEL - DIRECTOR 1329 CHESTERFIELD DRIVE CLEARWATER, FL 33756

MARQUIS J. SAMUEL - DIRECTOR 1329 CHESTERFIELD DRIVE CLEARWATER, FL 33756

ARNISA A. SAMUEL - DIRECTOR 1329 CHESTERFIELD DRIVE CLEARWATER, FL 33756

EARION L. SAMUEL - DIRECTOR 1329 CHESTERFIELD DRIVE CLEARWATER, FL 33756

ARTICLE VII: BYLAWS

THE POWER TO ADOPT, ALTER, AMEND OR REPEAL BYLAWS SHALL BE VESTED IN THE BOARD OF DIRECTORS AND THE SHAREHOLDERS, BUT THE BOARD OF DIRECTORS MAY NOT ALTER, AMEND OR REPEAL ANY BYLAWS ADOPTED BY THE SHAREHOLDERS IF THE SHAREHOLDERS PROVIDE THAT THE BYLAWS SHALL NOT BE ALTERED, AMENDED OR REPEALED BY THE BOARD OF DIRECTORS.

ARTICLE VIII: AMENDMENT

THESE ARTICLES OF INCORPORATION MAY BE AMENDED IN THE MANNER PROVIDED BY LAW. EVERY AMENDMENT SHALL BE APPROVED BY THE BOARD OF DIRECTORS, PROPOSED BY THEM TO THE STOCKHOLDERS AND APPROVED AT A STOCKHOLDERS' MEETING BY AT LEAST A MAJORITY OF THE STOCK ENTITLED TO VOTE, UNLESS ALL OF THE DIRECTORS AND ALL OF THE STOCKHOLDERS SIGN A WRITTEN STATEMENT MANIFESTING THEIR INTENTION THAT A CERTAIN AMENDMENT OF THESE ARTICLES OF INCORPORATION BE MADE.

ARTICLE IX: INCORPORATORS

THE NAME AND STREET ADDRESS OF THE PERSON(S) SIGNING THESE ARTICLES OF INCORPORATION AS THE INCORPORATOR(S) ARE:

EARNELL A. SAMUEL 1329 CHESTERFIELD DRIVE CLEARWATER, FL 33756

CERTIFICATION DESIGNATING REGISTERED AGENT/REGISTERED OFFICE

05 MAR -4 PM 3: 25 SECRETARY UF STATE

Pursuant to the provisions of Section 607.325 Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statements. the registered office/registered agent, in the state of Florida.

- 1. The name of the corporation is: EMAE Services, Inc.
- 2. The name and address of the registered agent and office is:

Earnell A. Samuel Jr. P. O. Box 729 Largo, FL 33779

TITLE: DIRECTOR/PRESIDENT

DATE: 3ートゥダ

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIA STATUTES.

SIGNATURE (Registered Agent)

DATE