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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : HUBCO

Account Number : 104662003400

Phone : (516)935-3940 Fax Number : (516)935-3088

FLORIDA PROFIT CORPORATION OR P.A.

Tony's Services A-Z Inc.

Certificate of Status	1
Certified Copy	0
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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:

Tony's Services A-Z Inc.

ARTICLE II PRINCIPAL OFFICE

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

Tony's Services A-Z Inc. 3945 Hollow Crossing Drive Orlando, FL 32817 05 MAR 29 AM 8: 05
SLOWLIART OF STATE
TALLAHASSEF FLORIDA

ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Barbara Hazelwood 3945 Hollow Crossing Drive Orlando, FL 32817

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):

Tony Hazelwood- 3945 Hollow Crossing Drive, Orlando, FL 32817- President Barbara Hazelwood- 3945 Hollow Crossing Drive, Orlando, FL 32817 - Treasurer

ARTICLES VI INCORPORATOR(S)

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

Tony Hazelwood- 3945 Hollow Crossing Drive, Orlando, FL 32817 Barbara Hazelwood- 3945 Hollow Crossing Drive, Orlando, FL 32817

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

25th day of **March** 2005.

Tony Hazelwood - Signature

Barbara Hazelwood - 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: ${f T}$	ony's Services A-Z Inc.		—	
2. The name and address of the registered	d agent and office is:	SE GRI TALLA	05 MAR	
	Barbara Hazelwood	282 282	R 29	T
	Name		7	Ē
	3945 Hollow Crossing Drive		ထ္	_
•	(P.O. Box or Mail Drop Box NOT Acceptable)		05	
	Orlando, FL 32817 (City / State / Zip)			

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.

March 25, 2005

(Date)

Barbara Hazelwood

SIGNATURE