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Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516) 935-3940

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FLORIDA PROFIT CORPORATION OR P.A.

Able's Innovation Mobile Service, Inc.

Certificate of Status	I
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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:

Able's Innovation Mobile Service, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Able's Innovation Mobile Service, Inc. 2304 Gayland Road Jacksonville, FL 32218

ARTICLE III SHARES

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

100,000 Shares at No Par Value

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

Anthony Miller 2304 Gayland Road Jacksonville, FL 32218 65 JUN 24 AM 10: 0°

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):

Anthony Miller - President 2304 Gayland Road Jacksonville, FL 32218

ARTICLES VI INCORPORATOR(S)

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

Anthony Miller 2304 Gayland Road Jacksonville, FL 32218

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

23rd day of June	2005.		•	
Anthony & mag-	···	·		

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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.

2. The name and address of the registere	ed agent and office is:
	Anthony Miller
	Name 2304 Gayland Road
	(P.O. Box or Mail Drop Box NOT Acceptable)
	Jacksonville, FL 32218
	(City / State / Zip)
corporation at the place designated in	ent and to accept service of process for the above stated on this certificate, I hereby accept the appointment as registere y. I further agree to comply with the provisions of all the state
corporation at the place designated in agent and agree to act in this capacit	n this certificate, I hereby accept the appointment as registere y. I further agree to comply with the provisions of all the statt erformance of my duties, and am familiar with and accept the
corporation at the place designated in agent and agree to act in this capacity relating to the proper and complete p	n this certificate, I hereby accept the appointment as registere y. I further agree to comply with the provisions of all the statt erformance of my duties, and am familiar with and accept the
corporation at the place designated in agent and agree to act in this capacit relating to the proper and complete p	n this certificate, I hereby accept the appointment as registere y. I further agree to comply with the provisions of all the statt erformance of my duties, and am familiar with and accept the
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