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Florida Department of State  
Division of Corporations  
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Julmor

## To:

Division of Corporations  
Fax Number : (850)205-0381

## From:

Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305)599-0839  
Fax Number : (305)716-0346FLORIDA PROFIT CORPORATION OR P.A.  
SPECIALIZED PARTY RENTALS, CORP.

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December 30, 2005

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FAS-T CORP. AGENTS, INC.

SUBJECT: SPECIALIZED PARTY RENTALS, CORP.  
REF: W05000057051

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

It appears the filing submitted has a typographical error in the entity name. Please verify this name and all other information contained in the filing and resubmit it for processing.

An effective date may be added to the Articles of Incorporation if a 2006 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

If you have any further questions concerning your document, please call (850) 245-6879.

Ruby Dunlap  
Regulatory Specialist  
New Filing Section

FAX Aud. #: H05000294159  
Letter Number: 005A00074154

**ARTICLES OF INCORPORATION  
OF  
SPECIALIZED PARTY RENTALS, CORP.**

FILED  
SECRETARY OF STATE  
DIVISION

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**ARTICLE I**

THE NAME OF THE CORPORATION IS:

**SPECIALIZED PARTY RENTALS, CORP.**

**ARTICLE II**

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF FLORIDA.

**ARTICLE III**

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZED TO ISSUE IS 100 SHARES AT \$10.00 PER VALUE.

**ARTICLE IV**

THE AMOUNT OF CAPITAL WITH WHICH CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$1,000.00.

**ARTICLE V**

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

**ARTICLE VI**

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE CORPORATION, IN THIS STATE SHALL BE:

**1175 SE 8 COURT  
HIALEAH, FLORIDA 33010**

**ARTICLE VII**

THE NAME (S) AND STREET ADDRESS(ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

**YOSELIN E. FERNANDEZ  
1175 SE 8 COURT  
HIALEAH, FLORIDA 33010**

ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN SIX DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF FOUR DIRECTORS WHOSE NAMES AND ADDRESSES ARE AS FOLLOWS:

YOSELIN E. FERNANDEZ - PRESIDENT - TREASURY  
1175 NE 8<sup>th</sup> COURT  
HIALEAH, FLORIDA 33010


ORLANDO FERNANDEZ - VICE-PRESIDENT - SECRETARY  
1175 NE 8 COURT  
HIALEAH, FLORIDA 33010

ARTICLE IX

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE, AND THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS SHALL BE:

YOSELIN E. FERNANDEZ  
1175 NE 8 COURT  
HIALEAH, FLORIDA 33010

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS TWENTY NINE DAYS OF DECEMBER, 2005

  
\_\_\_\_\_  
YOSELIN E. FERNANDEZ  
Incorporator

  
\_\_\_\_\_  
Date

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/ registered agent, in the State of Florida.

1. The name of the corporation is: **SPECIALIZED PARTY RENTALS, CORP.**

2. The name and address of the registered agent and office is:

**YOSELIN E. FERNANDEZ**

**1175 NE 8 COURT**

**HIALEAH, FLORIDA 33010**

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 STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

  
YOSELIN E. FERNANDEZ

DATE: 12/29/2005

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