# P0600003718

| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
| bA)                     | dress)            |             |
| <b>V</b>                | ,                 |             |
| (Ad                     | dress)            |             |
|                         |                   |             |
| (Cit                    | y/State/Zip/Phone | ∍#)         |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | ne)         |
| ·                       | ·                 | •           |
| (Do                     | ocument Number)   |             |
|                         |                   |             |
| Certified Copies        | Certificates      | s of Status |
| ·                       |                   |             |
| Special Instructions to | Filing Officer:   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         | Office Lise/Or    | nlv }       |
|                         |                   |             |
|                         |                   | \           |
| · ·                     |                   |             |
|                         |                   | 1.111,      |



700062312147

01/10/06--01038--008 \*\*78.75

FILED

10 PHI2: 01

OB JAN 10 MID 55

## **LAZARUS CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

| MAMI, FL 33105 (305) 5          | 32-3973   |
|---------------------------------|---|
|                                 | Office Use Only                                   |
| ORPORATION NAME(S) & DO         | OCUMENT NUMBER(S), (if known):                    |
| A PLUS HOME                     | AUTOMATION INC                                    |
| (Corporation Name)              | (Document #)                                      |
| (Corporation Name)              | (Document #)                                      |
| (corporation reality)           | (Southern 4)                                      |
| (Corporation Name)              | (Document #)                                      |
|                                 |   |
| (Corporation Name)              | (Document #)                                      |
| Walk in Pick up tim             | ne 2.00   |
| Mail out Will wait              | Photocopy Certificate of State                    |
| NEW FILINGS                     | <u>AMENDMENTS</u>                                 |
| Profit                          | Amendment   |
| Not for Profit                  | Resignation of R.A., Officer/Director             |
| Limited Liability Domestication | Change of Registered Agent Dissolution/Withdrawal |
| Other                           | Merger  |
| THER FILINGS                    | REGISTRATION/QUALIFICATION                        |
| Annual Report                   | ☐ Foreign   |
| Fictitious Name                 | Limited Partnership                               |
|                                 | Reinstatement Trademark                           |
|                                 | Other   |
|                                 | W   |
|                                 | Examiner's Initials                               |

CR2E031(7/97)

#### 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 1 - NAME

The name of the corporation shall be:

A Plus Home Automation Inches

#### ARTICLE II - PRINCIPAL OFFICE

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

2427 NW 3354 Miami FL 33142

#### **ARTICLE III - SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:  $\label{eq:corporation} $$\downarrow\circlearrowleft$$ 

#### **ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

OSCAR ESPINOZA 2427 NW 33St Miami F.L. 33142

4

#### ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of

Incorporation is:

|  |  | w 33 St                               |                   |                    |            | ٠        |
|--|--|---------------------------------------|-------------------|--------------------|------------|----------|
| The undersigned in Incorporation this      | ncorporator h                          | FL. 3314<br>Las executed 1<br>January |                   |                    |            | •        |
|  | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | gnature                               |                   |                    | <i>,</i> · | ,        |
| and the second                             | ARTICLE V                              | I- DIRECTOR                           | <u>(S)</u>        |                    | ,          | <b>.</b> |
| The name(s) and so<br>Articles of Incorpor | ration is (are)                        |                                       |                   | d net              | . 30       |          |
| Presid                                     | • •                                    | 2427 N                                | Espinos<br>W 33 S | H SSE              | JAN 10 PM  | 1        |
|  | ,                                      | Miami                                 | FL 3314           | 2 STATE<br>PLORIDA | 10 tZl     | <u> </u> |

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

Registered Agent Signature