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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0381

From: Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

FLORIDA PROFIT/NON PROFIT CORPORATION

CMN SERVICES INC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$70.00

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Division of Corporations

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To: Division of Corporations
Fax Number : (850) 204-9181

From: Account Name : A 1 & CORPORATE SERVICES, INC.
Account Number : 128010000247
Phone : (850) 494-3124
Fax Number : (305) 475-2911

FLORIDA PROFIT/NON PROFIT CORPORATION

CMN SERVICES INC

Certificate of Status	0
Certified Copy	0
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Estimated Charge	\$79.00

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be :
CMN SERVICES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is :

2771-29 MONUMENT RD #317
JACKSONVILLE FL 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:
1,500 COMMON SHARES PAR VALUE \$.10

ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers are:

DIRECTOR & PRESIDENT

CHRISTOPHER NORSE

2771-29 MONUMENT RD #317

JACKSONVILLE FL 32225

VICE PRESIDENT:

PHILLIP DUGGER

2771-29 MONUMENT RD #317

JACKSONVILLE FL 32225

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ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CHRISTOPHER NORSE

2771-29 MONUMENT RD #317

JACKSONVILLE FL 32225

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

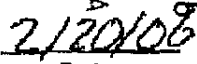
CHRISTOPHER NORSE

2771-29 MONUMENT RD #317

JACKSONVILLE FL 32225

Having been named as registered agent to accept service of process for the above corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.


CHRISTOPHER NORSE/ Registered Agent


Date


CHRISTOPHER NORSE/ Incorporator


Date

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