

Division of Corporations

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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)716-0346

FLORIDA PROFIT/NON PROFIT CORPORATION

JOHNSON EXCELLENT SERVICES CORP.

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10/30/2006

ARTICLE OF INCORPORATION

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2000 OCT 30 P 1: 31
TALLAHASSEE, FLORIDA

JOHNSON EXCELLENT SERVICES CORP.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: JOHNSON EXCELLENT SERVICES CORP.

The principal place of business of this corporation shall be:
801 N.Federal Hwy.
Hollywood.Fl. 33020

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United State, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is:

 $100 \times $10.00 = $1,000.00$

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

MOYRA HERNANDEZ 115 SW. 60 AVE. MIAMI.FL.33144 DIRECTOR

ARTICLE VI INCORPORATOR (S)

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

MOYRA HERNANDEZ 115 SW. 60 AVE. MIAMI,FL.33144 PRESIDENT, SECRETARY & TREASURER
100 wheres

Signature/Title

tion this	30 ch. day of October, 2006
	Signature/Title
	Signature/Title
	signature/little

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.

The	name	of	the	corpo	prat	ion	is:_				
			JOE	ONSON I	EXCEI	LENT	SERVI	CES COI	ep.		
	,										
The	name	and	add	iress	o£	the	regis	tered	agent	and	office
is	MOYRA HERNANDEZ										
	<u></u>		•			(1	Tame)				
				115 S	W. 60) AVE	ı.				
				(P. (), B	OX 1	OT AC	CEPTA	BLE)		
			Þ	IIAMI,	FLOR	AGI	33144				
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		The name	The name and	The name and add	JOHNSON The name and address is (P. (MIAMI,	JOHNSON EXCEI The name and address of is 115 SW. 60 (P. O. B	JOHNSON EXCELLENT The name and address of the is (I) 115 SW. 60 AVE (P. O. BOX 1) MIAMI, FLORIDA	JOHNSON EXCELLENT SERVICE The name and address of the regis MOYRA HI (Name) 115 SW. 60 AVE. (P. O. BOX NOT ACMINANT, FLORIDA 33144	JOHNSON EXCELLENT SERVICES CONTINUES THE name and address of the registered MOYRA HERNANDS (Name) 115 SW. 60 AVE. (P. O. BOX NOT ACCEPTA	JOHNSON EXCELLENT SERVICES CORP. The name and address of the registered agent MOYRA HERNANDEZ (Name) 115 SW. 60 AVE. (P. O. BOX NOT ACCEPTABLE) MIAMI, FLORIDA 33144	The name and address of the registered agent and is

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESI AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMACE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS MY POSITION AS REGISTERED AGENT.

SIGNATURE	V data	2000 SEC	
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DATE	10-30-06	TAR ASS	
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