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CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 5	552-5973	
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CORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):	
A-1 CERTIFIED.	INSPECTIONS, FAC.	_
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	_
(Corporation Name)	(Document #)	-
1		
(Corporation Name)	(Document #)	-
Walk in Pick up time	2.06	
Mail out Will wait	Photocopy Certificate of Stat	us
Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	PILED 2007 AUG -2 AM 9:52 SECRETARY OF STATE FALLAHASSEE, FLORIDA
OTHER FILINGS	REGISTRATION/QUALIFICATION	. •
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other	
	Examiner's Initials	

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:

A-1 CERTIFIED INSPECTIONS, INC.

ARTICLE II - PRINCIPAL OFFICE

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

7865 EW 28 SPEET

Migmi, floridg 33155

ARTICLE III - SHARES

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

100

ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EVELYN A. MULLIN.
7865 OW 28 STREET

Migni, AL 33155

<u>ARTICLE V – INCORPORATOR</u>

The name and address of the incorporator to these Articles of Incorporation is:

Evelyn Mullin 7865 EW 28 STREET Mianvi , FL 33155

The undersigned incorporator has executed these Articles of Incorporation this ______ day of _______ 20_______.

EMULL Signature

ARTICLE VI- DIRECTOR (S)

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

President - Evelyn Mullin 1865 SW 28 Street Priorii, FL 33155 2007 AUG -2 AM 9: 52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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