

# P07000107308

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 : 120010000247  
Phone : (800)494-3124  
Fax Number : (305)675-2811

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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**24 HOUR MOLD SERVICES, INC.**

Certificate of Status	0
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9/27/07

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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:

24 HOUR MOLD SERVICES, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is

3760 FALLSCREST CIRCLE  
CLERMONT, FL 34711

**ARTICLE III PURPOSE**

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

**ARTICLE IV SHARES**

The number of shares of stock:

1,500 COMMON SHARES PAR VALUE \$.01

**ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)**

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

DIRECTOR, PRESIDENT:  
EASTON CHAMBERS  
3760 FALLSCREST CIRCLE  
CLERMONT, FL 34711

DIRECTOR, VICE PRESIDENT:  
TANYA CHAMBERS  
3760 FALLSCREST CIRCLE  
CLERMONT, FL 34711

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**ARTICLE VI REGISTERED AGENT**

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

EASTON CHAMBERS  
3760 FALLSCREST CIRCLE  
CLERMONT, FL 34711

**ARTICLE VII INCORPORATOR**

The name and Florida street address of the incorporator is:

EASTON CHAMBERS  
3760 FALLSCREST CIRCLE  
CLERMONT, FL 34711

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.....  
*Having been named as registered agent to accept service of process for the above stated 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.*

  
\_\_\_\_\_  
EASTON CHAMBERS / Registered Agent

9/26/07  
Date

  
\_\_\_\_\_  
EASTON CHAMBERS / Incorporator

9/26/07  
Date

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