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Certified Copies	_ Certificates	s of Status
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THE DESCRETARY OF STATE

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### COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Multiple Services Group, Incorporated
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
frом: <u>Ј</u>	ames P. Zambroski Nami	e (Printed or typed)	
	9068 Quail Creek Driv	/e Address	
	Tampa, FL 33647	v, State & Zip	
	813-928-4328	Telephone number	

NOTE: Please provide the original and one copy of the articles.

#### 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:

## Multiple Services Group, Incorporated

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 9068 Quail Creek Drive Tampa, FL 33647

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To perform and carry out various legal and lawful enterprises.

#### ARTICLE IV SHARES

The number of shares of stock is:

10

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

James P. Zambroski 9068 Quail Creek Drive Tampa, FL 33647

Chief Operating Officer Chief Financial Officer

Cheryl H. Zambroski, PH.d. 9068 Quail Creek Drive Tampa, FL 33647

Secretary and Executive Director

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: James P. Zambroski

9068 Quail Creek Drive Tampa: FL 33647

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: James P. Zambroski 9068 Quail Creek Drive Tampa, FL 33647

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

| Signature/Registered Agent TAMES | FAMBROSK | Date |
| Signature/Incorporator TAMES | FAMBROSK | Date |

