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CSH SERVICES

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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

DIVISION OF CORPORATION

08 MAY 20 PM 12:39

RECEIVED

FLORIDA PROFIT/NON PROFIT CORPORATION

MOB CONNECTED TRAPPAZ, INC.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MOB CONNECTED TRAPPAZ, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1668 SW 44TH AVE

FORT LAUDERDALE, FLORIDA 33317

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 is:

1,500 COMMON SHARES PAR VALUE \$0.01

ARTICLE V INITIAL OFFICERS / DIRECTORS (optional)

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

PRESIDENT

JAIRIE IKONEN ISRAEL LOWE

1668 SW 44TH AVE

FORT LAUDERDALE, FLORIDA 33317

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PAGE 2 MOB CONNECTED TRAPPAZ, INC.

ARTICLE VI REGISTERED AGENT

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

ALEXIS DAY BENJAMIN
5907 SHERIDAN STREET
HOLLYWOOD, FLORIDA 33021

ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

JAHIRIE IKONEN ISRAEL LOWE
1668 SW 44TH AVE
FORT LAUDERDALE, FLORIDA 33317

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.


ALEXIS DAY BENJAMIN / Registered Agent

5-16-2008
Date


JAHIRIE IKONEN ISRAEL LOWE / Incorporator

5-16-2008
Date