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| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
| Connect of the | | | |
| DOC EXAM MED | | | |
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORID

COVER LETTER

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

| SUBJECT: Cambium Rental Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) | | | |
|---|--|---|------|
| Enclosed are an orig | ginal and one (1) copy of the ar | ticles of incorporation and a check for: | , |
| \$70.00 Filing Fee | \$78.75 Filing Fee A Certificate of Status | Status \$78.75 Filing Fee Certified Copy Certified Copy Certified Copy Status | e of |
| | | | |
| FROM: ke | Nam | e (Printed or typed) | _ |
| FROM: <u>ke</u> | P.O BOX 6215 | e (Printed or typed) Address | _ |
| FROM: ke | P.O BOX 6215 Fort lauderdate, ft 33310 | · · · · · · · · · · · · · · · · · · · | - |
| FROM: ke | P.O BOX 6215 Fort lauderdate, ft 33310 | Address | _ |
| FROM: ke | P.O BOX 6215 Fort lauderdale, fl 33310 Ci 954-650-1849 | Address | _ |
| FROM: ke | P.O BOX 6215 Fort lauderdale, fl 33310 Ci 954-650-1849 | Address ty, State & Zip | _ |

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

08 AUG 25 PH 3: 48

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

1000

The name of the corporation shall be:

Cambium Rental Inc.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 3033 NW 26 Street Lauderdale Lakes, FL 33311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to Rent COR and HRUCKS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Kendly Pierre 4340 22 ave NE Naples, Fl 34120 President

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is: kendly Pierre 4340 22 ave ne Naples, Fl 34120

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Kendly Pierre 3033 NW 26 Street Lauderdale Lakes, FL 33311

| Educated Lakes, 1E 33311 | |
|---|--|
| ***************** | ************ |
| Having been named as registered agent to accept service of proc certificate, I am familiar with and accept the appointment as regist | ess for the above stated corporation at the place designated in this ered agent and agree to act in this capacity |
| The same | 8-22-08 |
| Signature/Registered Agent | Date |
| Manuel | 8-22-08 |
| Signature/Incorporator | Date |