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DDSUCWARD Chellsouth, Net

FLORIDA PROFIT/NON PROFIT CORPORATION

Proxy Services Associates Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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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:

Proxy Services Associates Inc.

ARTICLE II PRINCIPAL OFFICE

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

Proxy Services Associates Inc. 4877 N. Hemingway Circle Margate, FL 33063

ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Valerie Harper 4877 N. Hemingway Circle Margate, FL 33063

Prepared By:
Bruce B. Hubbard
77 East John St.
Hickaville, New York 11801
1-518-935-3940

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ARTICLES V INITIAL OFFICER(S)/DIRECTOR(S)

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

Valerie Harper - 4877 N. Hemingway Circle, Margate, FL 33063 - President/Director Christina Austin-Valere - 7712 Grandview Boulevard, Miramar, FL 33023 - Vice President/Director

ARTICLES VI INCORPORATOR(S)

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

Valerie Harper - 4877 N. Hemingway Circle, Margate, FL 33063 Christina Austin-Valere - 7712 Grandview Boulevard, Miramar, FL 33023

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3rd day of December 2009

Valerie Harner - Signature

Christina Austin-Valere - Signature

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501. FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:	Proxy Services Associates Inc.	
2. The name and address of the register	ed agent and office is:	TALLARA ASEGRETA
	Valerie Harper	LE LASSEE
	Name	- FES
	4877 N. Hemingway Circle	STATE LORIDA
	(P.O. Box or Mail Drop Box NOT Acceptable)	DE -
	Margate, FL 33063	
	(City / State / Zip)	
	(City / State / Zip)	

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Valerie Harper
SIGNATURE

December 3, 2009

(Date)