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LAZARUS

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Division of Corporations

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TALLAHASSEE, FLORIDA

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**FLORIDA PROFIT/NON PROFIT CORPORATION
AMERICAN SERVICES DELIVERY INC.**

Certificate of Status	0
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January 5, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: AMERICAN SERVICES DELIVERY INC.
REF: W10000000286

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Becky McKnight
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FAX Aud. #: H10000000728
Letter Number: 710A00000178

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

AMERICAN SERVICES Delivery Inc.

ARTICLE II - PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING OF THIS
CORPORATION SHALL BE:

*6771 W FLAGLER ST
MIAMI, FL, 33144*

ARTICLE III - SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION
IS AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:

100

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS

*SAYLI LOPEZ
6771 W FLAGLER ST
MIAMI, FL, 33144*

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H10000000728SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE V - INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation is:

SAYLI LOPEZ
6771 W FLAGLER ST
MIAMI, FL 33144

The undersigned incorporator has executed these Articles of Incorporation this

01 day of JANUARY 20 10

Signature

ARTICLE VI - DIRECTOR (S)

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

SAYLI LOPEZ (P)
6771 W FLAGLER ST
MIAMI, FL 33144**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT**
/REGISTERED OFFICE

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



Registered Agent Signature

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