

P 11000084130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

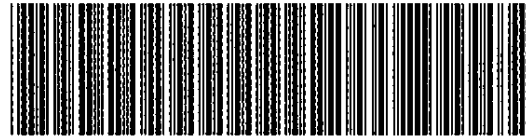
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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J. Stivers SEP 26 2011

IRISH SERVICES, INC.

ATX1

### 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: IRISH SERVICES, INC.

#### ARTICLE II PRINCIPAL OFFICE

Principal street address

11606 NW 19TH DRIVE

CORAL SPRINGS, FL 33071

Mailing address, if different is:

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
ANY AND ALL LEGAL PURPOSES.

#### ARTICLE IV SHARES

The number of shares of stock is: 10,000 SHARES AUTHORIZED, 100 ISSUED AT THIS TIME

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

Name and Title: JANE BROCK/PRES

Address: 11606 NW 19TH DRIVE

CORAL SPRINGS, FL 33071

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JANE BROCK

Address: 11606 NW 19TH DRIVE

CORAL SPRINGS, FL 33071

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JANE BROCK

Address: 11606 NW 19TH DRIVE

CORAL SPRINGS, FL 33071

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

Required Signature/Registered Agent

8/16/2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a  
document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

8/16/2011

Date

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