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FLORIDA PROFIT/NON PROFIT CORPORATION

William Allen Handyman Inc.

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

~ 01/02/15

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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:

William Allen Handyman Inc.

ARTICLE II PRINCIPAL OFFICE

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

18015 Victorian Drive Clermont, FL 34715



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:

William Allen 18015 Victorian Drive Clermont, FL 34715

Prepared By: Bruce B. Hubbard 77 East John St. Hicksville, New York 11801 1-516-935-3940

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

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

William Allen - President/Director 18015 Victorian Drive, Clermont, FL 34715

ARTICLE VI INCORPORATOR(S)

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

William Allen 18015 Victorian Drive, Clermont, FL 34715

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

18th day of December 2014

William Allen 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 LA WS 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:	William Allen Handym	an Inc.	
2. The name and address of the regis	stered agent and office is:		
	William Allen		***************************************
	18015 Victorian Driv	Name	
		il Drop Box NOT Acceptable)	
	Clermont, FL 34715	/ State / Zip)	
	(City	, state , z.ip)	
Having been named as registered corporation at the place designate agent and agree to act in this cap relating to the proper and comple	ed in this certificate, I hereb acity. I further agree to com	y accept the appointmen ply with the provisions o	nt as registered of all the statutes
obligations of my position as registered agent.		•	
			W 31
			- 1
William Allen		12/18/2014 (Date)	.s ω
SIGNATURE			