

P95000044529

TRANSMITTAL LETTER

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

000001508510
-06/01/95--01071--006
****131.25 ****131.25

SUBJECT: Anson Multi-Services INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM:

Name (printed or typed)

4699 NORTH SR 7 Suite G
Address

TAMARAC, FL 33319
City, State & Zip

(305) 731-5755 or 722-5468
Daytime Telephone number

NANCY HENDRICKS JUN - 9 1995

NOTE: Please provide the original and one copy of the articles.

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:

Anson Multi-Services Inc

ARTICLE II PRINCIPAL OFFICE

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

4699 North SR 7 Suite G
Tamarac, FL 33317

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:

Jamall Joachim
4699 North SR 7 Suite G
Tamarac, FL 33317

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Anson Joachin — 7103 Sportsman Dr
N. Lauderdale, FL 33068

Jamall Joachin 4697 North Sky Suite G
Tampa, FL 33319

ARTICLE VI - OFFICERS

Anson Joachin — President

Jamall Joachin — Vice President & Treasurer

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

30 day of May, 1995.

Jamall M. Joachin
Signature

Anson Joachin
Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**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 DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

Anson Multi-Service Inc

2. The name and address of the registered agent and office is:

Samuel Jonckin
(NAME)

4697 E North St Suite G
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Tamara FL 33319
(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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

05/30/95
(DATE)