## P96000009973

Department of State Division of Corporations P. O. Box 6327 Fallahassee, FL 32314	29 th 6: 33	
SUBJECT:(Prod	osed corporate name - must include sulfix)	
for : \$70.00	\$78.75 Filing Fee & Certificate  Additional Copy Required	
FROM:	Name (printed or typed)  1700 E. Las Olas Blvd, Ste.  Address  Ft. Landerdale FL 3330/  City, State & Zip	ICO
	305-463-7900  Daytime Telephone number  500001700656 -01/29/3601090015 ******78.75  ******78.75	

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

GB X1/96

## ARTICLES OF INCORPORATION

FILED

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The unclersigned incorporator(s), for the purpose of forming a corporation under the Florida Businessing Corporation Act, hereby adopt(s) the following Articles of Incorporation.

The name of the second standard he	ARTICLE	NAME	
The name of the corporation shall be	Eq	nipmont	Locatory, Inc

ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:

1700 E. Las Olas Blud Suite 100 Ft. Landerdale, FL 33301

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Joseph McGinness 1706 E. Las Olas Blud Ft. Landerdale FL 33301

## 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):

President: Desaph McGinness 1700 E. Las Olas 131 vd, Suite 100 Ft. Landardale, Fl 33301

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:  Equipment locator  Inc.	- <i>J</i>
2.	The name and address of the registered agent and office is:	
	Oseph (NAME)  (NAME)  (NAME)  (P.O. BOX OF Mail Drop BOX NOT ACCEPTABLE)	
	Ft. Landordale, Fl 3330/	

Having been named as registered agent and to accept vervice 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.

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