# PACOCITAL SMITTICLETTERS 3075

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

SUBJECT: <u>ATHENA SERVICES, INC</u>
(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check for  $\frac{122.50}{}$ .

400001777864 -04/11/96--01109--009 \*\*\*\*122.50 \*\*\*\*122.50

FROM:

DEVERIA D- Stokes
Name (printed or typed)

631 NW 1945 ST

Address

MINMI FL 33169

City, State, & Zip

(305) 653-0834

Telephone Number

FILLED

96 AFR 11 PH 2:59

SECUL BUXY OF STATE
TALLAHASSEE, FLORDA

Note: Please provide the original and one copy of the Articles.

#### ARTICLES OF INCORPORATION

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ATHENA SERVICES, INC

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 | NAME

The name of the corporation shall be:

ATHENA SERVICES INC

#### ARTICLE II PRINCIPAL OFFICE

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

BUSINESS

MAILING

1085 NE 1255 ST, STE221 N. 141AMI FL 33161 631 NW 1945ST MINHI FL 33169

#### ARTICLE III CAPITAL STOCK

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

1,000,000.

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MICHAEL BABB 631 NW 1945 ST MIAMI FL 33169

## ARTICLE V INCORPORATOR(S)

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

MICHAEL BABB, 631 NW 194 ST, MIAMI, FL 33/69
DEVERIA StokES, 631 NW 194 ST, MIAMI, FL 33/69

# CEPTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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.

The name of the corporation is: <u>ATHENA SERVI</u>	CES, INC
The name and address of the registered agent and office i	<u> </u>
MICHAEL BABB	7. 0
(NAME)	2.8
631 N.W. 194 st	
(P.O. BOX <u>NOT</u> ACCEPTABLE)	fire 15
MIAMI FL 33169	The to
(CITY/STATE/ZIP)	en s

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.

SIGNATUR	E	
DATE	3 APR 96	