MITTA 1.21 Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 A17 APPLIANCES SUBJECT: __ INC (Proposed corporate name - must include suffix) 600001841656 -05/29/96---01006--001 ++++*78.75 ++++*78.75 Enclosed is an original and one (1) copy of the articles of incorporation and a check for : ל\$78.75 [\$70.00 \$122.50]\$131.25 Filing Fee, Certified Copy & Certificate **Filing Fee** Filing Fee **Filing Fee** & Certificate & Certified Copy **Additional Copy Required** GEORGE FROM: ΝΑΚΗLΑ Name (printed or typed) DOLONITA 7504 DR. Address AMPA, FL. 3361 90 City, State & Zip HAY 29 881 0813 Ē Daytime Telephone number AH STATE -LORIDA ڢ ទួ

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 Florid Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLEI NAME

The name of the corporation shall be:

ALL APPLIANCES INC.

ARTICLE II **PRINCIPAL OFFICE**

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

GEORGE NAKHLA ; 7504 DOLONITA DR TAMPA, FL. 33615

ALL APPLIANCES 1. 7504 DOLONITA DR. TAMPA, PL. 33615

ARTICLE III SHARES

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

100 SHARES

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

GEORGE NAKHLA

7504 DOLONITA DR. TAMPA, FL. 33615

ARTICLE V INCORPORATOR(S) See instructions for officers/directors

The name(s) and street address(es) of the incorpo-tor(s) to these Articles of Incorporation is(aro):

GEORGE NAKHLA 7504 DOLONITA DR TAMPA, FL. 33615 ALL APPLIANCES INC 7504 DOLONITA DR TAMPA, FL. 33615

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

14" day of <u>MAY</u>, 19<u>96</u>.



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:

ALL APPLIANCES IN

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



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.

14/96 SIGNATURE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314