# P960000 97339 TRANSMITTAL LETTER

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

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Tallahassee, FL	32314							
SUBJECT:	Qui-				reser veth		Cor	ρ.
Enclosed is an o	riginal and or		FFECTIVE III		ration and a che	ck for :	:	
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				ADDIT	IONAL COPY	REQ	UIRED	
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FROM:	Jillann Gildea		
	Name (Printed or typed)		
	500 Cherokee Circle	SECATI NATURAL TALLAIV	- 2000 1000 1000 1000 1000 1000 1000 1000
	Sanford, FL 32773	-2 MHO: 09	9 (3)
	Cily, State & Zip	101 151 101	
	(401) 324 - 3714	09 FATE ORIDA	
	Daytime Telephone number		
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NOTE: Please provide the original and one copy of the articles.



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 22, 1996

JILLANN GILDEA 500 CHEROKEE CIRCLE SANFORD, FL 32773

SUBJECT: ALL-SERV PROPERTY PRESERVATION CORP. Ref. Number: W96000024746

We have received your document for ALL-SERV PROPERTY PRESERVATION CORP.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$131.25. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6919.

Beth Register Corporate Specialist Supervisor

Letter Number: 696A00053109

Tiling.

#### 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.

The name of the corporation shall be:  ALL-Serv Property	•	SEC-2 MID: 09 SECRETARIO PROPRIO PROPIO PROPRIO PROPRIO PROPRIO PROPRIO PROPRIO PROPIO PROPRIO PROPIO PR
ARTICLE II	PRINCIPAL OFFICE	

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

119 Slade Drive, Longwood, 7L 32750

#### ARTICLE III SHARES

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

200 no pour value

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

Jillann Gildea 119 Slade Drive Longwood, FL 32750

#### 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):

Drive Longuezel, 72 32-773
Drive Longwood, 72 32-173
The Corporation is formed for the purpose-
of Arnerty treseluation.
there are presently no other management.
there are presently no other marrigarient. The corp shares share be 200 no por value
The expends effective date shall be
January 1, 1997
Jenuary 1, 1997  The Corporation Shall be designated a Sub Chaples 5  The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
18th day of 1/0 vember , 19 96.
(An additional article must be added if an effective data is requested.)

(An additional article must be added if an effective date is requested.)

Jules Alder Rasidert
Signature
Signature

### Notarization is not required

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	e name of the corporation is:	all-Serv Proporty F	reservation Con	<b>\f</b>
2. Th	e name and address of the regi	stered agent and office is:		
	Jillan	n Gildea	_	
	10 (P.O. B	(NAME)  COCO DE VO  OX OF Mail Drop Box NOT ACCEPTABLE)	SECRE!	
	Longi	UNIC FL 32750 (CITY/STATE/ZIP)	-2 MINOR	1
C I marina			LONIE CONTRACTOR	

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) (DATE) (DATE)