# 97 APR 14 PM 12: 19

JECKETALT L. STATE TALLAHASSEE, FLORIDA

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

900002142159--0 -04/14/97--01085--014 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

		2UCES ASSO name - must include suf		
Enclosed is an original of for:  \$70.00 Filing Fee	and one (1) co \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate	nd a check
FROM:	Name	STOPHER D (printed or typed)	ZIRIKLE	<b>,</b>
		Address	<u>3462</u>	
		33-1685 Telephone number		

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

# ARTICLES OF INCORPORATION

FILED

97 APR 14 PN 12: 19

ECKLIDATE OF STATE
TALLAHASSEE, FLORIDA

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:

KING-DOM SERVICES ASSOCIATES INC

ARTICLE II PRINCIPAL OFFICE

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

220 CROTON AVENUE APT#209 LANTAMA, FURION 33462

ARTICLE III SHARES

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

20

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CHRISTOPHER O. ZIRKLE 220 CROTON AVENUE APT \$209 LANTANA FLORIDA 33462

# 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):

CHRISTOPHER D ZIRKLE 220 CROTEN AVENUE APT \$209 LAMANA, FURIDA 33462

The und	ersigned inc	orporator(s) has(have	e) executed these Articles of Incorporation this
10	day of	APRIL	, 19 <u>97</u>
(An addi	tional article	must be added if an	effective date is requested.)
	<u>~</u>	Mistop	la Zirkle
			Signature
	•		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

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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.

I. The name of the corporation is:	KING-DOM SERVICES ASSOCIATES INC			
2. The name and address of the reg	istered agent and office is:			
	CHRISTOPHER D ZIRKLE			
	(NAME)			
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)				
LANTAN	(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) (DATE)