## PAGOOD OF TOST TRANSMITTAL LETTER

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

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SUBJECT: HOONGICE Service Inc.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

\$78.75 Filing Fee

& Certificate

\$122.50

Filing Fee
& Certified Copy

□ \$131.25

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

ROM: Hndren

me (Printed or typed)

30c) C1201

Address

City State & Zip

7-1537

Daytime Telephone number

98 JAN 23 AM ID: 41

WS Y26

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

Business Corporation Act, hereby daopis the jollowing Articles of theorporation	13 Co
ARTICLE I NAME  The name of the corporation shall be:	CORPORATIONS CORPORATIONS
The name of the corporation shall be:  A P Appliance Service, Inc.	42 42
APTICI F II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
3951 Gult Share Blyd North suite 104	
Naples, Florida 3403	
A DOTOT DITT SUAPES	ia
The number of shares of stock that this corporation is authorized to have outstanding at any one time	is.
1,000	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Florida street address of the initial registered agent are:  Andrew F. Peck Rival North # 104	
1402 62 (1 10:101 2 " 2	
A PATICITE IV INCORPORATOR	
The name and address of the incorporator to these Articles of Incorporation are:	
Andrew F. Peck Blud North, Suite* 104	
Naples, Aprida 34103	
1-17-98	
Signature/Incorporator Date	<u> </u>

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

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/Registered Agent

Date