# POSCHARACTE 33050

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

000002482250--4 -04/08/98--01028--005 \*\*\*\*131.25 \*\*\*\*131.25

CHR IECT.	Certified	Backflow	Inspections	Incorporated		
ODDICO.	(Decreased corporate game - must include suffix)					

Enclosed is an original for:  \$70.00  Filing Fee	and one (1) co style="color: blue;">\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy  Additional Cop	x \$131.25 Filing Fee, Certified Copy & Certificate	and a check	
FROM:	Paul Maggard  Name (printed or typed)			98 APR -8 SECRETAR TALLAHASS	
		Address		AM 9: 1	
		ty, State & Zip		O A DA	
	(954)698-			-	=
	Pompano Be Ci (954)698-	each Fl. 33064 ty, State & Zip		SE S	

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

#### ARTICLE I NAME

The name of the corporation shall be:

Certified Back Flow Inspections Incorporated

#### ARTICLE II PRINCIPAL OFFICE

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

5332 N.E. 19th Terrace Pompano Beach Fl. 33064

#### ARTICLE III SHARES

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

1 Share

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Paul Maggard 5332 N.E. 19th Terrace Pompano Beach Fl. 33064

### 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):

Paul Maggard (President) 5332 N.E. 19th Terrace Pompano Beach

The undersigned	incorporator(s) has(h	ave) executed these Arti	cles of Incorporation	ı this	-	
27th day of	March	, 19 <mark>98</mark>	·• . <u></u>	<u> </u>	•	-, <del></del>
(An additional ar	ticle must be added if	an effective date is requ	ested.)			
	Paul Maggard	Margal Signature (Pr	esident)		<b></b> .	
		Signature			_57	-
		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 name of the corporation is:	Certified	Back Flow	Inspectio	ns Inc.	
					<u> </u>	
2.	The name and address of the regis	tered agent and office is:		-	APR -8 ECRETAR LLAHASS	
	Paul Maggar	đ		-	Y OF	
		(Nami	E)		TOT	ق 🖰
	5332 N.E. 1	9th Terrac	e .	<del>-</del> 7	A PARTE	20
	(P.O. Bo	ox or Mail Drop Bo	X NOT ACCEPTA	BLE)	•	-
	Pompano Bea	ch Fl. 330		8-3088		
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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.

March 27,1998
(SIGNATURE)

(DATE)