# Department of State Division of Comparties

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

000002626370--7 -08/27/98--01030--008 \*\*\*\*122.50 \*\*\*\*122.50

SUBJECT:	Appliance Inspection & Service, Inc.				
	(Proposed corpo	rate name - must include suf	fix)		
Enclosed is an or	iginal and one(1) copy of the article	es of incorporation and a	check for:		
Filing Fee	*	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED		
FRO	OM: <u>Thomas Silber</u> Name (Pr	inted or typed)		-	
-5 Meadow Run Ct Address AHAS 27					
	Ormond Beach, FL 32174 City, S	State & Zip	7 PH 4: 1		
O,	Daytime Te	lephone number	Dri -		

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

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### 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.

## ARTICLE I NAME

The name of the corporation shall be:

Appliance Inspection & Service, Inc.

# ARTICLE II PRINCIPAL OFFICE

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

Ormónid Beach, FL 3217 3

### ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AN	D STREET ADDRESS				
The name and Florida street address of the initial registered ager	nt are:				
Thomas Silber 5 Meadow Run Ct Ormond Beach, FL 32174	AUG 27				
ARTICLE V INCORPORATOR	Fig 7 M				
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:					
Thomas Silber 5 Meadow Run Ct Ormond Beach, FL 32174					
Thomas B Softe	8-24-98				
Signature/Incorporator	Date				

(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

Doto