

P98000080203
TRANSMITTAL LETTER

FILED

98 SEP 11 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

500002637485--5
-09/11/98--01077--010
*****70.00 *****70.00

SUBJECT: U S A EMERGENCY RESTORATION, 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

FROM: Greg Quinn
Name (printed or typed)

2609 Center Ave
Address

Ft. Lauderdale, Fl. 33309
City, State & Zip

(954) 522-2290
Daytime Telephone number

Greg Quinn GAVE
AUTHORIZATION BY PHONE TO
CORRECT corp name
DATE 9/11/98 last pg.

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

P. Hall

SEP 16 1998

ARTICLES OF INCORPORATION

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SECRETARY 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:

U S A EMERGENCY RESTORATION, INC.

ARTICLE II PRINCIPAL OFFICE

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

2609 Center Ave.
Ft. Lauderdale, Fl 33309

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GREG QUINN
2609 CENTER AVE
FT LAUDERDALE, FL 33309

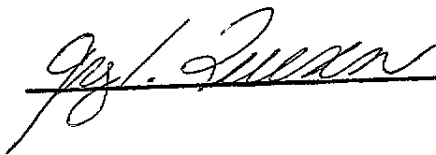
ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GREG QUINN
2609 CENTER AVE
FT LAUDERDALE, FL 33309

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

25th day of AUGUST, 1998.



Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: U S A EMERGENCY RESTORATION, INC.

2. The name and address of the registered agent and office is:

GREG QUINN

(Name)

2609 CENTER AVE

(P.O. Box not acceptable)

FT LAUDERDALE, FL 33309

(City/State/Zip)

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TALLAHASSEE, FLORIDA

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)

9/25/98
(Date)