P980000901

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

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SUBJECT:		cing Concepts, It		
Enclosed is an original a	and one(1) copy of the article	es of incorporation and a c	check for:	1
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate	► \$122.50 Filing Fee & Certified Copy	☐ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM: _	Larry E. Nielso		ALLAH ALLAH	98 SEP
	Name(Printed or typed)	ÄSSEE	क्रिज ।
-		Address		PM 3:54
Pal in	Wellington, FL 33414 City, State & Zip			ूनि 🗲
My 12/1	561-790-5532		; 	
, 0//	Daytime	: Telephone number		

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

ARTICLES OF INCORPORATION

FILED

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

98 SEP 15 PM 3:54

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Zero Plus Marketing Concepts, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1957 Shower Tree Way

Wellington, FL 33414

ARTICLE III SHARES

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

50

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Larry E. Nielson 1957 Shower Tree Way Wellington, FL 33414

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Larry E. Nielson/ President 1957 Shower Tree Way Wellington, FL 33414

/Presiden

09/09/98

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

Date