## Department of State of Comparations

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

900002644719--4 -09/21/98--01093--013 \*\*\*\*\*\*78.75 \*\*\*\*\*\*78.75

sed is an original a	and one(1) copy of the artic	les of incorporation and a	a check for :
☐ \$70.00 Filing Fee	\$78.75 Filing Fee	□\$122.50 Filing Fee	\$131.25 Filing Fee,
	& Certificate	& Certified Copy	Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM: _	Saria F	? Jaylor.	P 21
	name ()	Printed or typed)	Angel 9
	307071.5	Address (Af)t	700 RATE
_	Hollywoo	L Florida , State & Zip	33001

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

Daytime Telephone number





## 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:
Saylor Made Services, Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:  3670 N. 566 auc # 725 Hollywood, Ilorda 3503
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
One thousand (1,000)
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS  The name and Florida street address of the initial registered agent are:  JUNIA Saylor-Boton, Stoaue # 125 Hollywood, fla3302,
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
The name and address of the incorporator to these reduces of the incorporator to the i
Signature/Incorporator  5/50/98 SSR 22  Date To B 11
Signature incorporator
(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