POSSING TRANSMITTAL LETTER OF STORE OF

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

SUBJECT:	ARKADIO SERVI			_
	(Proposed co	orporate name - must include	suffix)	
		8	::::::::::::::::::::::::::::::::::::::	01087004
Enclosed is an original	l and one(1) copy of the article	es 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	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Name (P	TRZMIELOWS rinted or typed)	TASE	98 FI
	P.O. BOX	Address FL 33045 State & Zip	ARY OF STAN SCEE, FLOA	FILED NOV 12 MI 11: 48
		2 - 9826 Selephone number		Ö
	Daytime I	e Hall	HOLY 1 STAND	

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.

NOV 12 AM 11: 48 SECRETARY OF STATE

ARTICLE I NAME

The name of the corporation shall be:

ARKADIO SERVICE, INC.

ARTICLE II PRINCIPAL OFFICE

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

P.O. BOX 2071 KEY WEST, FL 33045

SHARES ARTICLE III

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

ONE

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

TRZMIELOWSKI ARKADIUSZ

3333 DUCK AVE # C-201 KEY WEST, FL 33040 ARTICLE V INCORPORATOR

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

TR2MIELOWSKI ARKADIUSZ 3333 DUCK AVE # C-201 KEY WEST, FL 33040

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

10/28/98