# P990005031 TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 OS FEB 15 PIND 119

SUBJECT:

DISASTER SERVICES INC.

(Proposed corporate name - must include suffix)

100002775781--3 -02/15/99--01122--019 \*\*\*\*\*78.75 \*\*\*\*\*78.75

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

\$131.25

Filing Fee & Certified Copy Filing Fee,

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM - MICHAEL P. COLEMAN

Name (Printed or typed)

2726 WITLEY AUE.

Address

PALM HARBOR FLORIDA

City, State & Zip

813-835-1445

Daytime Telephone number

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

#### 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:

DISASTER SERVICES LUC.

ARTICLE II PI	RINCIPAL	<b>OFFICE</b>
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The principal place of business and mailing address of this corporation shall be:

3675 S. WESTSHORE BLUD. TAMPA, FLORIDA 33629

### ARTICLE III SHARES

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

1000 SHARES TOTAL

500 MICHAEL P. COLEMAN 500 MARK J. SPICOLA

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MICHAEL P. COLEMAN 2726 WITLEY ANE. PALM HARBOR, FL 34685

## ARTICLE V INCORPORATOR

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

MICHAEL P. COLEMAN 2726 WHITLEY AUE PALM HARBOR, FL 34685

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

soloaland Blh O

1/22/99