299000 LUTZ TRANSMITTAL LETTER

Department of State

P. O. Box 6327 Tallahassee, FL 32314				,
SUBJECT: Ste	ephenson Services, Inc. (Proposed corpora	ate name - must include suffix	x)	usum uss
	•		40000278 -02/19/99 *****78.	308142 01060014 75 *****78.75
Enclosed is an original \$70.00 Filing Fee	l and one(1) copy of the article	s of incorporation and a \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	8924 N.W. 34th Stree	inted or typed) et	SECRE TARY OF	99 FEB 19 AM
	Cooper City, Florida	a 33024	FLO	_ و و

City, State & Zip (954) 435-7344 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:

Stephenson Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

8924 N.W. 34th Street Cooper City, Florida 33024

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

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Randy Stephenson

8924 N.W. 34th Street

Cooper City, Florida 33024

ARTICLE V INCORPORATOR

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

Randy Stephenson

8924 N.W. 34th Street

Cooper City, Florida 33024

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 myposition as registered agent

Signature/Registered Agent

Date

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