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

APARTMENT LEASING

(Proposed corporate name - must include suffix)

Enclosed is an original and	one(1) copy of th	e articles of incor	poration and a check	for:
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\$70.00 Filing Fee \$78.75

Filing Fee

& Certificate

\$122.50

\$131.25

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

PARTMENT

City, State & Zip

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.

The name of the corporation shall be: A-H PARTMENT LEASING EXPERT, LC.
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
The principal place of business and mailing address of this corporation shall be: 801 Three TSIAND BIVD # 105, HALLANDALE, FLORIDA 3700
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
SEVEN THOUSAND FIVE HUMBRED (7,500)
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
BOI Three Island BlvD., # 105 HALLANDALE, 71, 33009
A TOWNS TO STAND TO A STAND TO
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
The name and address of the incorporator to these Articles of Incorporation are: JUNEAN HARRIS BOI TORES ISLANDS, # 105 HALLANDALE, FLORIDA 33009
Judith Harris March 18, 1999
Signature interpretator

(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