

TRANSMITTAL LETTER

P990000 29806

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

SUBJECT:

ESTATE Services Unlimited INC.
(Proposed corporate name - must include suffix)

800002820348--9
-03/26/99-01098-002
*****87.50 *****87.50

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
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

DANIEL E Jenkins
Name (Printed or typed)

935 Bignoa Rd.
Address

West PALM Beach FLA.
City, State & Zip

561- 714-8103 - 561- 804-9845
Daytime Telephone number

99 MAR 26 AM 7:33
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. CHESER MAR 30 1999

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:

ESTATE Services Unlimited INC.

ARTICLE II PRINCIPAL OFFICE

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

935 Bigino Rd W.P.B. FLA Florida
33405

ARTICLE III SHARES

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

1

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and Florida street address of the initial registered agent

DANIEL E Jenkins
935 Bigino Rd West PALM
Beach Florida 33405

ARTICLE V INCORPORATOR

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

DANIEL E Jenkins
935 Bigino Rd.
West PALM Beach FLA 33405

3/20/99

Signature/Incorporator

Date

(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

3/20/99

FILED
99 MAR 26 PM 7:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA