## P99000034416

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

SUBJECT:	NATION SERVICE (Proposed corpor	S CorporA ate name - must include suf	TION fix)	<del></del> .		
		Qı	00002837 -04/12/990 *****87,50	1147001		
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 of Status	□\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED			
FROM: Wyoma Williams Name (Printed or typed)						
	157 NW	92 5tr	ee+	-		
	Miami Shore City, 5	S, FL 3315 State & Zip		FAX.		
Daytime Telephone number						

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

A. Purinti: APR 1 4 1999

ARTICL	ES OF	INCORI	PAR A	TION
ARTICL	LO UF	INCURI	UKA	HUN

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:

NATION SERVICES Corporation

ARTICLE II PRINCIPAL OFFICE

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

157 NW 92 Street Miami Shores, FLorida 33150

ARTICLE III SHARES

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

(\$ 100,000 °°) hundRED THOUSAND

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ROBERT Williams 157 NW 92 Street Miami Shores, FL 33150

INCÓRPORATOR <u>ARTICLE V</u>

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

Wyoma Williams 9430 NW & Place MiAMI, FL 33150

ome Williams, Wyonn Williams 4/

(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 4-7-99

KMC 130 Signature/Registered Agent