PHONOMETALETTER 521

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

	\mathcal{D}	6-2:	Tno	
SUBJECT:	Perretti	SERVICES	111C.	· <u></u>
	(Proposed corporate name - must include suffix)			

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

2 \$78.75

Filing Fee & Certificate

□\$122.50

0

□ \$131.25

Filing Fee & Certified Copy

Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Name (Printed or typed)	991 SECI
6371 Pinestead Dr # 1326	OCT - (RETAIN AHASS
Address	S PA
Lake Worth FL 33463 City, State & Zip	I: 20 STATE LORIDA
361-432 8081 Daytime Telephone number	- 25-

T BROWN OCT 1 1 1999

99 OCT -6 PH 1: 20
SECRE LANY OF STATE
TALLAHASSEE, FLORIDA

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.

Date	
<u></u>	
 	·
· 	
poration are:	- -
· · · · -=	
Fl. 33.463	
<u>=</u>	
er stock	
	ne is:
- · · · · · · · · · · · · · · · · · · ·	2
, <u></u>	
· · ·	
n shall be:	
· · · · · · · · · · · · · · · · · · ·	-
INC	
- 10	
<u> </u>	-
	ave outstanding at any one time $r > 1 = cK$ STREET ADDRESS Fl. 33-463 poration are:

(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 |