199000104847

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

P. O. Box 6327 Tallahassee, FL 32314	
SUBJECT: MiZNER (Proposed corpo	Services, Tuc. Type orate name - must include suffix)
Enclosed is an original and one(1) copy of the artic	les of incorporation and a check for:
\$70.00 \$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate of Status
FROM: Todd Leo A	ADDITIONAL COPY REQUIRED Printed or typed)
115 old Jupiter	L. Beach Rd.
Jepitor F	FIA 33477 State & Zip
561-818 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 99 NOV 29 AM 7: ALTICLE I. NAME
The name of the corporation shall be:
MIZNER SERVICES, INC.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
46346 PO BOX 30041
Palm Beach Grandons, FL 33420
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
·
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
Todd (884) 0 101
Todd Jepher Beach Rd 115010 Supider Beach Rd Jupider 33477
Jupiden 33477

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Toold esployer Beach Rd

Thiter FIA 3 3/4 77

Signature/Incorporator

11/22/99 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

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