7P99000105674

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

800003060358--5 -12/03/99--01084--002 ****840.00 ******70.00

SUBJECT: A ABBELYN ESCORTS INC

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

\$70.00 \$78.75 \$122.50 \$131.25
Filing Fee & Certificate & Certified Copy & Certified Copy & Certificate

Additional Copy Required

FROM:

| SRUND CLOVELAND | Name (printed or typed) | PROPERTY | PROP

FILED
1999 DEC -3 MI 11: 04
SECRETARY OF STATE
AND AHASSEE. FLORIDA

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

FILED
1999 DEC -3 AM 11: 04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

A ABBELYN ESCORTS INC.

ARTICLE II PRINCIPAL OFFICE

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

22 S E 4 STREET #219 BOCA RATON FL 33432

ARTICLE III SHARES

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

one

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BRUND CLEVELAND 22 S.E. 4 STREET # 219 BOCA RATON FC 33432

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

BRUNO CLEVELMO 22 SE 4 STREET BOCA RATON FL 33432

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

FIL.ED

1999 DEC -3 AM 11: N4

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	A	ABBI	=Lyn	ESCORB	PM.		→ . #
2.	The name and address of the registe	ered agent	and office	is:				
	Bruvo clevelano						*	
		SE 4	STR		#219			
	·	•	Box <u>NOT</u> . Fron		33432	·		
			STATE/ZIP)			\.		

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) [2/01/99]
(DATE)