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DEPARTMENT OF REVENUE
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SECRETARY OF STATE
DIVISION OF CORPORATION

OCT 29 2015

T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

AtlasTrax USA Corporation

Signature _____

Requested by: SETH

10/28/15

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
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____ Cert. Copy _____
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____ Corp Record Search _____
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____ Courier _____

COVER LETTER

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

SUBJECT: ATLASTRAX USA CORPORATION, a Florida corporation
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Michael E. Leach, Esq.
Name (Printed or typed)

2400 East Commercial Blvd., Suite 706
Address

Fort Lauderdale, Florida 33308
City, State & Zip

954-351-8800
Daytime Telephone number

Mike@Leach.com
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: AtlasTrax USA Corporation, a Florida corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1525 SE 14 Court
Deerfield Beach, FL 33441

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any legal purpose

ARTICLE IV SHARES

The number of shares of stock is: 1000 at \$1.00/share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carolyn Stash, Pres. Director

Name and Title: _____

Address: 1525 SE 14 Court
Deerfield Beach, FL 33441

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Carolyn Stash

Address: 1525 SE 14 Court
Deerfield Beach, FL 33441

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carolyn Stash

Address: 1525 SE 14 Court
Deerfield Beach, FL 33441

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Carolyn Stash

Required Signature/Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Carolyn Stash

Required Signature/Incorporator

Date

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DIVISION OF CORPORATIONS
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