OFFICE ASE ON A OPENING.

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(Requestor's Name)

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

(Phone #1

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S)	& DOCUMENT NUM	BER(S) (if known):	1 HAR	
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2. (Corporation Name	• 	(Documen/#)	107 S	•
3. (Corporation Name	_	(Document #)	ATL RIDA	
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		NEW FILINGS
	\times	Profit
'		NonProfit
		Limited Liability
		Domestication
		Other

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/Director
•	Change of Registered Agent
	Dissolution/Withdrawal
	Merger



OTHER FILINGS
Annual Repolit
 Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Éoreign
 Limited Partnership
 Reinstatement
 Trademark .
 Other

Examiner's Initials

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

The name of the corporation shall be:

AA NETWORK SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

267 N.W. 40 CT MIAMI, FL 33126

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES @ \$1.00 PER VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida Street address of the initial registered agents is:

ALAIN ALONSO 267 N.W. 40 CT MIAMI, FL 33126

ARTICLE V INCORPORATOR

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

ALAIN ALONSO 267 N.W. 40 CT MIAMI, FL 33126

ARTICLE VI DIRECTOR

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

ALAIN ALONSO 267 N.W. 40 CT MIAMI, FL 33126

Signature/Incorporator

03/09/6/ Date

Having been named as registered agent and to accept services 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 statues 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/Incorporator

Date /