https://ccliss1.dos.state.ii.us/scripte/cuicovi.exc



Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H0000003474 4)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Division of Corporations Fax Number : (850)922-4001

From:

Account Name : FAS-T CORF. AGENTS, INC. Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

ALASKA TECH SUPPLY, INC.

Certificate of Status	: 0	<u>, 191 - 51 - 5</u>
Certified Copy	1	
Page Count	03	
Estimated Charge	\$78.7	5



6013 01/25/00 10:04 Fl Dept of State p1 /1



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 25, 2000

FAS-T

1

SUBJECT: ALASKA TECH SUPPLY, INC. REF: W00000002003

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

If you have any further questions concerning your document, please call (850) 487-6931.

Becky McKnight Document Specialist FAX Aud. #: E00000003474 Letter Number: 800A00003341

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

HOOODOO3474 4 ARTICLES OF INCORPORATION

... <u>OF</u>

ALASKA TECH SUPPLY , INC.

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

ARTICLE I NAME

The name of the corporation shall be:

ALASKA TECH SUPPLY, INC.

The principal place of business of this corporation shall be: 8017 LAKE DRIVE APT. # 202 MIAMI, FIORIDA, 33166

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 60 SHARES

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

RAFAEL A. CASTELLANDS 8017 LAKE DRIVE APT. # 202 MLAMI, FLORIDA, 33166

TULLO A. GOMEZ 13101 SW 116 SE, MIAMI, FLORIDA, 33186

٠٠,

SECRETARY OF STATE DIVISION OF CORPORATION OO JAN 25 AM 11: 37

H0000003474 4

H0000003474 4 *

ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

RAFAEL A. CASTELLANOS 8017 LAKE DRIVE APT. 202 MIAMI, FLORIDA, 33166 TULIO A. GOMEZ 13101 SW 116 ST. MIAMI, FLORIDA, 33186

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 20th day of JANUARY 2000

Signature(s) of Incorporator(s)

H00000003474 +4

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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:

ALASKA TECH SUPPLY, INC.

2. The name and address of the registered agent and office is:



HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325. FLORIDA STATUTES.

SIGNATURE 01/20/00 DATE

H0000003474 4

· · .