

100000042544

CAPITOL SERVICES d/b/a
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)

1406 Hays Street, Suite 2

(Address)

Tallahassee, FL 32301 (904) 656-3992

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

100003226551--3
-04/27/00--01045--013
*****78.75 *****78.75

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. AD Finance U.S. Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 4/27

☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

FILED
00 APR 27 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
00 APR 27 AM 10:56
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark

T. SMITH APR 27 2000

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: **AD FINANCE US INC**

ARTICLE II PRINCIPAL OFFICE

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

**10422 U.S. Highway 19
Port Richey, FL 34668**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **100**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Paralegal & Attorney Service Bureau, Inc.
1406 Hays St., Suite 2
Tallahassee, FL 32301

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):

- ALAIN DUMONT, CH. CAPPELLE STREET 150, 8930 MENEN, BELGIUM
- CHRISTINE VANTOMME, KLOOSTER STREET 83A, 8560 WEVELDEN, BELGIUM

ARTICLE VI : PURPOSES

OFFICE ADMINISTRATIVE SERVICES

FACILITIES SUPPORT SERVICES

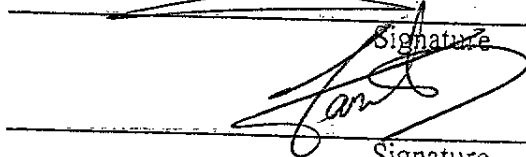
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20 day of April, 19 2000



Signature

A. DUMONT



Signature

C. VANTOMME

Signature

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

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

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: AD FINANCE US, Inc.

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

Paralegal & Attorney Service Bureau, Inc.
(NAME)

1406 Hays St., Suite 2, Tallahassee, FL 32301

(P.O. BOX NOT ACCEPTABLE)

Tallahassee, FL 32301

(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

SIGNATURE [Signature]

(corporate officer)

TITLE

DIRECTOR

DATE

20 / APRIL / 2000

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 [Signature]

Kathleen J. Hill, Pres.

DATE

4/27/00

REGISTERED AGENT FILING FEE: \$5.00