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Certificate of Status

TION NAME(S) & DOCUMENT NUMBER(S) (if kno	own)
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1.	AUSS, INC		
2.	(Corporation Name)	(Document #)	A SA
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NEW FILINGS		
.	Profit :	
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 AMENDMENTS
Amendment
Resignation of R.A., Officer/Director
Change of Registered Agent
Dissolution/Withdrawal
 Merger

OTHER FILNGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

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Examiner's Initials

FILED
SECRETARY OF STATE
ENVISION OF CORPORATIONS

ARTICLES OF INCORPORATION FOR AVSS. INC.

00 MAY 26 PM 1: 13

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:

AVSS, INC.

ARTICLE II PRINCIPAL OFFICE

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

14108 S.W. 168 LN. MIAMI, FL 33177

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have shall be:

SHARES: 500 @ \$1.00

ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial registered agent shall be:

ISMAEL PEREZ 14108 S.W. 168 LN. MIAMI, FL 33177

ARTICLE V INCORPORATOR

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

ISMAEL PEREZ MARIO CARVAJAL 14108 S.W. 168 LN. MIAMI, FL 33177

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

00 MAY 26 PM 1: 13

Signature of Incorporator

Date

ARTICLE VI DIRECTOR(S)/OFFICER(S)

The name(s) and address(es) of the director(s)/officer(s) to these Articles of Incorporation are:

ISMAEL PEREZ (P/D) MARIO CARVAJAL (VP) 14108 S.W. 168 LN. MIAMI, FL 33177

Having been named as registered and to accept service of process for the above started corporation at the place designated in this certificate, I hereby accept the appointment as registered agent an 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 of Registered Agent

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