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CORPORATION(S) NAME

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Acknowledgment

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# ARTICLES OF INCORPORATION

OF

These Articles are in compliance with Chapter 607, F.S.

#### ARTICLE I

The name of this corporation shall be:

AMERICAN BYTE COMPUTER CORP.



### **ARTICLE II**

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

#### **ARTICLE III**

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

3835 S.W. 8 ST., CORAL GABLES, FLORIDA 33135

#### **ARTICLE IV**

The general nature of business of this corporation is to transact any and all lawful business.

## ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue are 100 shares having an individual par value of \$ 1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

#### **ARTICLE VI**

The name and street address of the initial Registered Agent of this corporation shall be:

LUIS F. TORRES
3835 S.W. 8th St.
MIAMI, FLORIDA 33134
ARTICLE VII

The initial board of Directors shall consist of a total of person(s) and the name and address of the person(s) who are to serve as an initial director(s) is(are):

Luis f. torres pRESIDENT Felipe Serna. VICE PROSIDENT

#### **ARTICLE VIII**

The name and address of the incorporator executing these Articles of Incorporation is: Luis F. Torres

3835 S.W. 8th St. Miami, FL 33134

The undersigned has executed these Articles of Incorporation this 3 day of Aug., 20 00.

Incorporator

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, 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.

REGISTERED AGENT

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SECRETARY OF STATE
TALLAHASSEE FLORIDA