# PACCE TELETE 8808

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

000003355290---2 -08/14/00--01086--002 \*\*\*\*\*\*70.00 \*\*\*\*\*\*70.00

SUBJECT: RICHAED STATEN TRANSMISSIONS / NC

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

\$78.75

Filing Fee

& Certificate

□\$122,50

Filing Fee

& Certified Copy

\$131.25

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: SICHARD STATEN TRANSMISSIONS, INC.
Name (Printed or typed)

1514 MONA AVE.

OCOEF FL. 34761
City, State & Zip

(401) 579~ 7692

Daytime Telephone number

OO AUG 14 PH 1:4
SECRETARY OF STAT

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NOTE: Please provide the original and one copy of the articles.

#### ARTICLES OF INCORPORATION

OO AUG 14 PM 1:42

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business  $O_R^{S/N}$ . Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

RICHARD STATEN TRANSMISSIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

1514 MONA AVE. OCOEE, FL. 34761

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:

RICHARD STATEN 1514 MONA AVE. OCOEE, FL. 34761

### ${\bf ARTICLE} \ {\bf V} \quad \ {\bf INCORPORATOR}({\bf S})$

See instructions for officers/directors

The name(s) and street address(es) of the inco	orporator(s) to these	Afficies of incorporation	i is(are).
RICHARA B. S	TATEN	RESIDENT	
1514 MOND A	√E.	•	
OCDEE FL.	34761		

The unde	ersigned in	corporator(s) has(h	ave) executed these Articles of I	ncorporation in
31	day of	JULY		
(An addit	tional artic	le must be added if	an effective date is requested.)	
		Acidest	Bignature Signature	
			Signature	
			Signature	

### Notarization is not required

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

## CERTIFICATE OF DESIGNATION OF 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 co	rporation is:	CHARD	STATEN	TRANSMI	SSIDPS /NC
2. The name and add	ress of the registered				OO NUG IL PH
-	1514 Mo (P.O. Box or M			)	STATE STATE
_	00000	(CITY/STATE	/ZIP)	<del></del>	

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.

Rechard 13 States 7-31-00
(SIGNATURE) (DATE)