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**Florida Department of State**

Division of Corporations

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Katherine Harris, Secretary of State

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

**EFFECTIVE DATE**09-21-00

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 SEP 22 AM 11:11

**FILED****FLORIDA PROFIT CORPORATION OR P.A.****AXIOM U.S. CORPORATION**

Certificate of Status	0
Certified Copy	1
Page Count	03
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**FLORIDA DEPARTMENT OF STATE**  
Katherine Harris  
Secretary of State

September 21, 2000

FAS-T CORP.

SUBJECT: AXIOM U.S. CORPORATION  
REF: W00000023151

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.

IN ARTICLE II YOU HAVE STATED THAT YOU WANT AN EFFECTIVE DATE AS OF THE DATE OF EXECUTION AND ACKNOWLEDGMENT, BUT YOU HAVE NO DATE LISTED PLEASE GIVE THAT DATE.

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Tracy Smith  
Document Specialist

FAX Aud. #: H00000050105  
Letter Number: 600A00050016

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EFFECTIVE DATE

09-21-00

ARTICLES OF INCORPORATION  
OF  
AXIOM U.S. CORPORATION

The undersigned subscriber of those articles of incorporation, each a natural person, competent to contract, hereby associated themselves together to form a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation is: AXIOM U.S. CORPORATION  
And the address is: 5205 NW, 74<sup>TH</sup> AVE. MIAMI, FL. 33166

ARTICLE II. DURATION

The corporation shall have perpetual existence, commencing on the date of execution and acknowledgment of these articles.

ARTICLE III. PURPOSE

The purpose of this corporation is to be engage in any activities or business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV. CAPITAL STOCK

This Corporation is authorized to issue 1000 shares of one dollar (\$1.00) per value common stock, which shall be designated "Common Shares".

ARTICLE V. ADDRESS

The street address and mailing address of the registered office of this corporation is:

8260 W. FLAGLER STREET, SUITE 2-C  
Miami, Fl. 33144

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And the name of the initial registered agent of this corporation at that address is:

Julio C. Molina                      8260 W. Flagler St. Suite 2 C  
Accountant                              Miami, Fl 33144

Who hereby is familiar with and accepts the duties and responsibilities as registered agent for said corporation.

#### ARTICLE VI. INITIAL BOARD OF DIRECTORS

The Corporation shall have one (1) Director initially. The number of directors may be either increased or decreased from time to time by an amendment of the by laws of the Corporation in the manner provided by law but shall be never be less than one.

The names and address of the initial board of directors of this Corporation are:

GABI HYPKO  
5205 NW, 74<sup>TH</sup> AVE. Miami, Fl. 33166

#### ARTICLE VII. INCORPORATOR

The name and address of the Incorporator signing these articles of incorporation is:

JULIO C. MOLINA  
8260 W. FLAGLER STRET. SUITE 2-C  
Miami, Fl. 33144

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation. 9-21-00

  
INCORPORATOR

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**CERTIFICATE OF DESIGNATED REGISTERED AGENT**

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 agent, in the State of Florida.

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

**JULIO C. MOLINA**  
**8260 W. FLAGLER STREET, STE 2-C**  
**MIAMI, FL. 33144**

Having been named as Registered Agent and to accept service of process for the above stated corporation and 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 obligation of my position as registered agent.

Signature \_\_\_\_\_



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