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Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)541-3694 Fax Number : (305)541-3770

FLORIDA PROFIT CORPORATION OR P.A.

altee, inc.

Certificate of Status	0
Certified Copy	1
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ARTICLES OF INCORPORATION

ODOCT 13 PHIZ: 17 The undersigned incorporator, for the purpose of formand a phile region under the Florida Business Corporation Act, hereby of the purpose of formand a phile region under the Florida Business Corporation. corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: ALTCC, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1550 NE Miami Gardens Drive Suite 305 North Miami Beach, FL 33179

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 1,000,000 shares of common stock.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is: Gene S. Rosen, 1550 NE Miami Gardens Drive Suite 305 North Miami Beach, FL 33179 ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is: Gene S. Rosen 1550 NE Miami Gardens Drive Suite 305 North Miami Beach, FL 33179

The undersigned has executed these Articles of Incorporation this _____12 ___day of __October . 2000.

Gene S. Rosen

. Incorporator

Prepared By: GENE S. ROSEN Suite 305 1550 N.E. Miami Gardens Drive North Miami Beach, Florida 33179 Florida Bar #175752 Telephone: 949-2113

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ALTCC, Inc.

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 mediatered office/registered agent, in the state of Florida.

The name of the corporation is:

The name and address of the registered agent and office is: 2. Gene S. Rosen (NAME) 1550 NE Miami Gardens Drive, Suite 305 (P.O. BOX NOT ACCEPTABLE) North Miami Beach, Florida (CITY/STATE/ZIP) SIGNATURE (Corporate tega Officer) TITLE Vice President

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.

DATE

SIGNATURE DATE October 12, 2000

October 12, 2000

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GENE & ROSEN, ATTORNEY AT LAW Suite 305, Skylake State Bank Bldg , 1570 Mixmi Cardensorive, No. Mixki Geack, Florida کردول مرادی ا