

P000000115366

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

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000065762 7)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 DEC 18 AM 8:39

FLORIDA PROFIT CORPORATION OR P.A.

GEM FIRE SYSTEM, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

**ARTICLES OF INCORPORATION
OF
GEM FIRE SYSTEM, CORP.**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 DEC 18 AM 8:39

ARTICLE I

The name of the corporation is: **GEM FIRE SYSTEM, CORP.**

ARTICLE II

The Corporation may engage in or transact in any or in all activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III

The Corporation is authorized to issue and have outstanding an aggregate number of One Hundred (100) shares of one class of common stock, having a par-value of One (\$1.00) Dollar per share. This consideration to be paid for each share of stock shall be fixed by the Board of Directors.

ARTICLE IV

All shareholders of the Corporation shall be vested with full preemptive rights.

ARTICLE V

The Corporation initial Registered Agent and Registered Office in the State of Florida are:

INITIAL REGISTERED AGENT: Loyda Sosa
INITIAL PRINCIPAL OFFICE : 5860 NW 199 St.
and REGISTERED OFFICE Miami, Fl. 33015

Having been named Initial Registered Agent to accept service of process of the Corporation at the Initial Registered Office designated in these Articles of Incorporation, I hereby accept such and consent to act in this capacity and agree to comply with all the requirements of the law pertaining thereto.

ARTICLE VI

The number of Directors constituting the Initial Board of Directors of the Corporation are two, the number of Directors may be increased or decreased from time to time by Laws but shall never be less than one.

ARTICLE VII

The name and address of the members of the Initial Board of Directors is:

Name	Address
Loyda Sosa	5860 NW 199 St. Miami, Fl. 33015
Rafael Sosa	5860 NW 199 St. Miami, Fl. 33015

ARTICLE VIII

The name and addresses of the Incorporators executing these Articles of Incorporation are:

Title/Name	Address
President Loyda Sosa 100 % Share	5860 NW 199 St. Miami, Fl. 33015
Treasury Rafael Sosa 0 % Share	5860 NW 199 St. Miami, Fl. 33015


Loyda Sosa

ACKNOWLEDGMENT

STATE OF FLORIDA]
] SS
COUNTY OF MIAMI DADE]
]
_____]

Before a Notary Public authorized to take acknowledgment in the STATE OF FLORIDA and COUNTY OF MIAMI DADE , set forth above, personally appeared Loyda Sosa and Rafael Sosa to be the person(s) who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed those Articles of Incorporation.

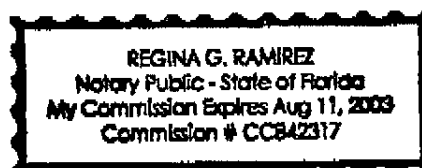
IN WITNESS WHEREOF, I have set here unto my hand and seal affixed in the STATE OF FLORIDA, COUNTY OF MIAMI DADE, this 15st. day of December, 2000.



Notary Public

STATE OF FLORIDA AT LARGE

My commission expires: August 11, 2003



CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 607.0501 and 617.0501, 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 corporation is: **GEM FIRE SYSTEM, CORP.**
2. The name and addresses of the registered agent and office is:

Loyda Sosa
5860 NW 199 St.
Miami, Fl. 33015

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.

Signature: _____

Date: _____

Loyda Sosa
12/15/00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 DEC 18 AM 8:39