

PO10000003212

MICHAEL ANGUELO
3396 N W S RIVER DRIVE
MIAMI, FL 33142

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

800003523358--6
-01/04/01--01068--016
*****78.75 *****78.75

RE: E M A REPAIR SERVICE, INC

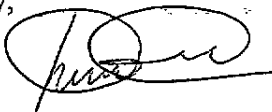
Enclosed is a check for \$ 78.75 together with two copies of the articles of incorporation
of E M A REPAIR SERVICE, INC

Please return a certified copy to the registered agent of the corporation:

MICHAEL ANGUELO
3396 N W S RIVER DRIVE
MIAMI, FL 33142

Thank you for your attention to this request.

Sincerely,



FILED
01 JAN -4 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Feb
19

ARTICLES OF INCORPORATION

OF

E M A REPAIR SERVICES, INC.

FILED
01 JAN -4 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporators, for the purpose of forming a corporation under the Florida Corporation Act, Hereby adopt the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

E M A REPAIR SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

3396 N W S RIVER DRIVE
MIAMI, FL 33142

ARTICLE III CAPITAL STOCK

The number of Shares of Stock that this corporation is authorized to issue and have outstanding at any one time is:

10,000 (Ten Thousand)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

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


MICHAEL ANGUELO
3396 N W S RIVER DRIVE
MIAMI, FL 33142

ARTICLE V INCORPORATORS

The name and street address of the incorporators to these Articles of Incorporation are:

MICHAEL ANGUELO
3396 N W S RIVER DRIVE
MIAMI, FL 33142


The undersigned have executed these Articles of Incorporation this 2 Day of January
2001



Signature

Signature

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION 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 OF REGISTERED AGENT



Signature

1/2/01

Date