

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

PO1000062554

SUBJECT:

AML Enterprises, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900004435499--2

-06/21/01--01082--002

*****87.50 *****87.50

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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

COM: Barbara Nelson
Name (Printed or typed)

16001 S.W. 95 Avenue
Address

Miami, Florida 33157
City, State & Zip

305-232-8430
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE FLORIDA

01 JUN 21 PM 3:59

FILED

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

Barbara GAVE
AUTHORIZATION BY PHONE TO
CORRECT out
DATE 6/22
DOC. EXAM Be

✓ JUN 22 2001

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

AML Enterprises, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3300 N.W. 1st Court
Miami, Florida 33168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To do any and all business as permitted by the laws of the State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

One (1)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Cleora Major, President
3420 Oak Avenue
Coconut Grove, Florida 33133

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

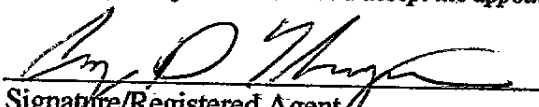
Craig Thompson
17721 S.W. 108 Court
Miami, Florida 33157

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cleora Major
3420 Oak Avenue
Coconut Grove, Florida 33133

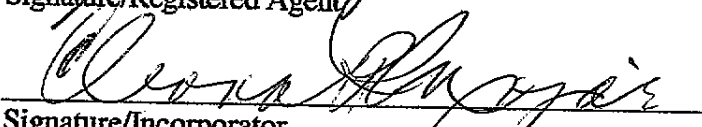
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

03/30/01

Date



Signature/Incorporator

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA