# 02000089855

### Florida Department of State

Division of Corporations Public Access System

#### **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.

(((H02000182912 4)))

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)205-0381

From:

Account Name : ACE INDUSTRIES, INC.

Account Number : 070744001530 Phone

Fax Number

: (305)358-2571 : (305)358-7832

### FLORIDA PROFIT CORPORATION OR P.A.

UNIQUE CARD SYSTEMS, INC.

Certificate of Status	0
Certified Copy	ı
Page Count	01
Estimated Charge	\$78.75

108-19,

#### H02-182912

## Articles of Incorporation

Article 1:

Name of Corporation: UNIQUE CARD SYSTEMS, INC.

Address of Corporation: 3115 NE 184 ST., STE. 4105 AVENTURA, FLORIDA 33161

Article 2:

Capital Stock: The number of shares which the corporation has authorized

to be outstanding at any one time is 1,000, with a par value of \$1.00.

Article 3:

REGISTERED AGENT: RAWN C. WILLIAMS SR.

REGISTERED OFFICE: 3115 NE 184 ST., STE. 4105 AVENTURA, FLORIDA 33761

\*I am familiar with and hereby accept the duties and responsibilities as Registered Agent for said corporation.

Signature of Registered Agent

ယ

Article 4:

The Board of Directors are: (Board of Directors is NOT REQUIRED).

First listed is President, Second is Vice President, then Secretary/Treasurer.

1. RAWN C. WILLIAMS SR. (P,VP,S/T), 3115 NE 184 ST., STE. 4105, AVENTURA, FL 33161

3.

Article 5:

The NAME and ADDRESS of the INCORPORATOR is:

RAWN C. WILLIAMS SR. 3115 NE 184 ST., STE. 4105 AVENTURA, FLORIDA 33161

In witness whereof, I have subscribed my name:

Signature of Incorporator

H02-182912