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To: Division of Corporations
Fax Number : (850)205-0381

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

FILED
2002 NOV -7 AM 8:36
STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

ATLAS GROUP SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

11-08-02
B.

ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

ATLAS Group Services, Inc.

ARTICLE II - PRINCIPLE OFFICE

The principle place of business and mailing of this corporation shall be:

4970 Haverhill Commons Circle
W.P.B. Florida 33417

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Hundred (100) Shares

ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Lisandro Tomas Rodriguez
4970 Haverhill Commons Circle
W.P.B. Florida 33417

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ATLAS GROUP SERVICES, INC.
FLORIDA

ARTICLE V - INCORPORATOR(S)

The name(s) and street address (es) of the incorporator(s) to these Articles of Incorporation is are (are):

Lisandro Tomas Rodriguez
4970 Haverhill Commons Circle
W.P.B. Florida 33417

The undersigned incorporator(s) has (have) executed these Articles of Incorporation This day of ____ 20__


Signature

ARTICLE VI - DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

Lisandro Tomas Rodriguez
4970 Haverhill Commons Circle
W.P.B. Florida 33417

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.


REGISTERED AGENT