

P03000020290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

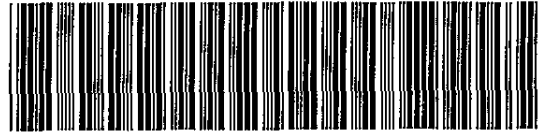
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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gjb

TRANSMITTAL LETTER

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

SUBJECT: ASSOCIATED MANUFACTURERS OF CENTRAL FLORIDA, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

FROM: ANGUS C. SMITH

Name (Printed or typed)

1200 PINE HARBOR POINT CIRCLE

Address

ORLANDO, FL 32806

City, State & Zip

407 886-5254

Daytime Telephone number

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

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:

ASSOCIATED MANUFACTURERS OF CENTRAL FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2700 N. ORANGE BLOSSOM TRAIL, ORLANDO, FL 32804
P.O. BOX 561042, ORLANDO, FL 32856

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

600 COMMON STOCK, PAR VALUE \$1.00

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ANGUS C. SMITH, PRESIDENT AND SECRETARY
ANGELA A SMITH, VICE PRESIDENT AND TREASURER

ARTICLE VI REGISTERED AGENT

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

ANGUS C. SMITH
1200 PINE HARBOR POINT CIRCLE
ORLANDO, FL 32806

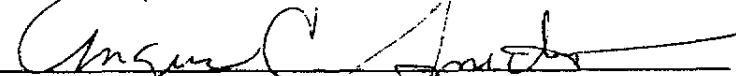
ARTICLE VII INCORPORATOR

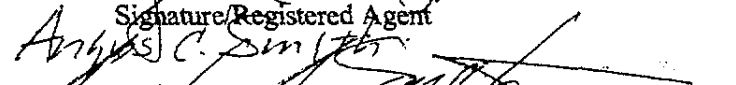
The name and address of the Incorporator is:

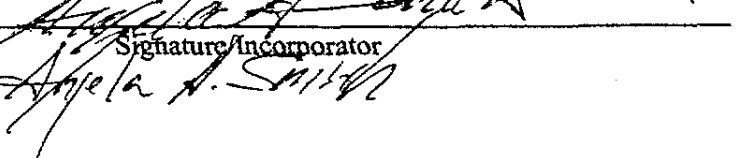
ANGELA A SMITH
1200 PINE HARBOR POINT CIRCLE
ORLANDO, FL 32806

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TALLAHASSEE, FLORIDA

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


Signature/Incorporator


2/13/03
Date
2/13/02
Date