

P0300004953

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.

(((H03000186640 6)))

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)206-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : T20000000257
Phone : (850)224-8870
Fax Number : (850)224-7047

FILED
03 MAY -5 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.
QUALITY M-USA INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing

Public Access Help

gsl/g

ARTICLES OF INCORPORATION

H03000186640 6

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

QUALITY M. USA INC.

ARTICLE II PRINCIPAL OFFICE

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

355. SOUTH BUENA VISTA AVE
ORLANDO FL 32835

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

MUSATTIN UCAR
355. SOUTH BUENA VISTA AVE ORLANDO, FL, 32835

ARTICLE V INCORPORATOR

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

MUSATTIN UCAR
355 S. BUENA VISTA AVE ORLANDO, FL, 32835




Signature/Incorporator

05/05/03

Date

(An additional article must be added if an effective date is requested.)

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



Signature/Registered Agent

05/05/03

Date

H03000186640 6

FILED
03 MAY -5 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA