JAN-1-1999 12:01P FROM: Division of Corporations TO:18502050381

Page 1 of 2

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.

(((H03000256464 6)))

Note: DO NOT hit the REFRESII/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 : NATIONS BUSINESS CENTER, INC.

Account Number : 720000000238 Phone : (305)591-9448 Fax Number : (954)753-3447

FLORIDA PROFIT CORPORATION OR P.A.

G A A COMMUNICATIONS, INC.

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

P:5



FLORIDA DEPARTMENT OF STATE Gienda E. Hood Secretary of State

August 20, 2003

NATIONS BUSINESS CENTER, INC.

SUBJECT: G A A COMMUNICATIONS, INC.

REF: W03000023623

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight Document Specialist New Filings Section FAX Aud. #: H03000256464 Letter Number: 603A00047150

FILED

FAX AUDIT#(((H030002567676))))

03 AUG 20 AM 8: 17

SECRETARY OF STATE TALL AHASSEE, FLORIDA

ARTICLES OF INCORPORATION

TO: SECRETARY OF STATE, STATE OF FLORIDA, TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the Corporation shall be: GAA Communication 8 Inc.

The principal place of business of this corporation shall be:

1718 NN 78 WAS

PEMBROKE PINES

FL 33024

ARTICLE II NATURE OF BUSINES

This corporation may engage in any business permitted under the laws of the United State, the State of Florida, or any other State, Country, Territory, or Nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1000.

FAX AUDIT#: (((H 03XX 2564646)))

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are): (TERMATNE FLORABLE whom resides at 1718 NW 78 WAY Andre Arnold PRINES FL 33024

ARTICLE VI INCORPORATOR(S)

The names(s) and street address(es) of the incorporator(s) to these articles of incorporation is (are): GERMAINE EAWALB whom resides at 1718 NW 78 WAY

Plows FL 35024

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this <u>/8</u> day of <u>Augus 1</u>, 2003.

Signature(s) of Incorporator(s)	
(TERMAZNE	President/Incorporator

ANDRE ARNOLD VICE PRESIDENT

)))

FILED

FAX AUDIT#(((10 3000 2564646

)))

03 AUG 20 AM 8: 17

CERTIFICATE OF DESIGNATION

CERTIFICATE OF DESIGNATION

FALLAHASSEE, FLORIDA

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, Florida Statutes, the Undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation: (All Communications Inc.

2. The name and address of the registered agent and office is:

GERMAZNE FAWAKS
1718 NW 78 WAY
PEMBROKE PENES
FL 33024 SIGNATURE:

TITLE: Incorporator/Registered Agent

Date: 8/18/43

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE:

Date: 8/18/03

FAX AUDIT#: (((H

)))