

P03000152478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

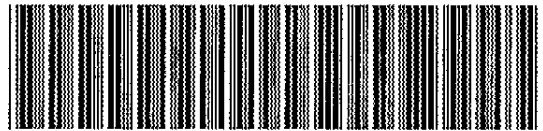
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000025290710

12/16/03--01009--008 **78.75

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 DEC 16 PM 12:54

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED
03 DEC 16 AM 11:55

12/17/03

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. AMD MULTIPLE SERVICES, INC.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)



Walk in



Pick up time

2:00



Certified Copy



Mail out



Will wait



Photocopy



Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**CERTIFICATE OF INCORPORATION
OF
AMD MULTIPLE SERVICES, INC.**

We, the undersigned, hereby associate ourselves together for
The purpose of becoming a corporation under the laws of the
State of Florida. Providing for the formation, rights, privileges,
Immunities and liabilities of Incorporation for profit.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 DEC 16 PM 12:54

ARTICLE I

The name of the corporation should be

AMD MULTIPLE SERVICES, INC.

ARTICLE II

The corporation will engage in any activity or business
Permitted under the laws of the State of Florida and the
United States of America.

ARTICLE III

The maximum number of shares, which the corporation is
Authorize to issue and have outstanding at any one time is
100 shares of common stock, which shares shall be of no par
Value. All stock is to be issued as fully paid and exempt from
Assessment.

ARTICLE IV

The pledge, sale, transfer or other disposition of the
Capital stock may be governed and restricted by the by-laws
Or written agreement among the stockholders which shall be
On file in the office of the corporation.

ARTICLE V

The amount of capital with which its corporation may begin
Doing business shall be not less than five hundred dollars
(\$500.00).

ARTICLE VI

The existence of the corporation is perpetual.

ARTICLE VII

The initial post office address of the principal office of Corporation in the State of Florida is: **1930 SOUTH PALMETTO AVE. APT 9, SOUTH DAYTONA, FL 32119.**

The board of directors may from time to time move the Principal office to any other address in the State of Florida. The registered address of the corporation is: **1930 SOUTH PALMETTO AVE. APT No. 9, SOUTH DAYTONA, FL 32119.** Registered agent at the address is **AGUSTIN MOTADUVAL**

ARTICLE VIII

A board shall manage the business of the corporation Of directors consisting of no less than one and no more than Five directors. A quorum for the holding of a meeting of The board of directors and for the transactions of any Business, which will be properly done by the directors on Behalf of the corporation shall consist of majority of Members thereof; but the directors, by unanimous consent in Writing, Included among the minutes of the corporation, may Consent to the doing of any act and such consent in writing Shall have the same force and effect as though the said act Had been done and authorized at a meeting at which a quorum Had been present, or such duties may be delegated to an Executive committee.

ARTICLE IX

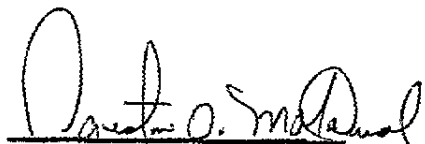
The names and post office of the members of the first board
Of directors and the slate of corporate officers

AGUSTIN O MOTADUVAL	1930 SOUTH PALMETTO AVE No. 9
PRESIDENT/SECRETARY	SOUTH DAYTONA, FL 32119
MARIA E MOTADUVAL	1930 SOUTH PALMETTO AVE No. 9
Vice PRESIDENT/TREASURER	SOUTH DAYTONA, FL 32119

(none)

Stock of the corporation may be issued pursuant
To the provisions of section 1244 of the Internal Revenue Service
Code, so that the stockholders of the Corporation may receive
The benefits provided hereunder.

In witness whereof, we have hereunto set our hands and
Seals, this December 9TH of 2003


AGUSTIN O MOTADUVAL
1930 SOUTH PALMETTO AVE No. 9
SOUTH DAYTONA, FL 32119

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN
FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY
BE SERVED.**

Pursuant to the provisions of the section 607.0501, Florida
Statutes, the undersigned corporation, organized under the
Laws of the State of Florida.

The name of the corporation is, **AMD MULTIPLE SERVICES, INC.**
certify under the laws of the State of Florida, with its principal place of
business at , City of Miami, State of Florida **named AGUSTIN O
MOTADUVAL** as agent to accept process in State of Florida County
of **VOLUSIA**.

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.


AGUSTIN O MOTADUVAL
REGISTERED AGENT

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 DEC 16 PM 12:55