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B. McKnight JUL 1 8 2005

TRANSMITTAL LETTER

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

SUBJECT: A 1 CY	CLES INC. (PROPOSED CORPORA)	TE NAME – <u>MUST INCLI</u>	DE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: MI	CHAEL BELAND		
	2582 PALMARITA RD.	(Printed or typed) Address	
		State & Zip	
	561-603-6671 Daytime Te	elephone number	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	
The name of the corporation shall be:	e e e e e e e e e e e e e e e e e e e
A 1 CYCLES INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2582 PALMARITA RD. WPB FL. 33406	
ARTICLE III PURPOSE	5 (7
The purpose for which the corporation is organized is:	9 V
THE PRODUCTION AND REPAIR OF CUSTOM MOTORCYCLES	
ARTICLE IV SHARES	TARY OF CO
The number of shares of stock is:	
100	STATE STATE PRATION 2: 53
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	SS TORS
MICHAEL BELAND 28 WEST MAIN ST BROOKFIELD MA 01506 C.E.O.	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: BROOKE RYDBERG 2582 PALMARITA RD. WPB FL. 33406	. <u></u>
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
MICHAEL BELAND 28 WEST MAIN ST. BROOKFIELD 01506	
**************************************	********* esignated in this

Signature/Registered Agent

Signature/Incorporator

7-11-05

7-11-05

Date

Date