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**L Burch** SEP 2 1 2005

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

DATE: 9-19-05

Re:	A-A.T.C.	. Inc.
	(Name of Corporation)	•

#### Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours.

William Hesbury

(Individual's Name)

A-A. T. C.

(Name of Corporation)

MAILING ADDRESS OF CORPORATION —		
4305 - 19Avenue W.		
Bradenton, F1. 34209-5126		
PHONE		
(941) 792-4478		
Area Code Number Ext.		

### ARTICLES OF INCORPORATION

The undersigned acting as the incorporators of a corporation under the Florida Business Corporation Act, adopt(s) the following articles of incorporation for such corporation:

ARTICLE I - CORPORATE NAME The name of the corporation is: ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

#### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue \_\_\_\_\_\_shares of common stock, par value \$ \( \llowbrace{L} \). OO

#### ARTICLE V - INITIAL PRINCIPAL OFFICE

The street address of the initial principal office and, if different, the mailing address is:

STREET ADDRESS FLORIDA ZIP 34221 Mailing address, if different STREET ADDRESS FLORIDA ZIP CITY

#### ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office and the name of the initial registered agent at the office is:

ORIDA ZIP34209-5(4

## ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have THREE (3) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME NICHOLAS B. KOUTE	SCHENKO	
ADDRESS 1316-28+HAVE DRIV	EWEST	
CITY PALMETTO	STATE FLA	ZIP 34221
NAME DAVID L. GLESSMA	: M	
ADDRESS 2349 MONT PELIER	RD	
CITY PUNTA GORDA	STATE FLA	ZIP 33983
NAME DOMINIC F. MACINA		
ADDRESS 2669 ORACLE LANE		
CITY HORTE PORT	STATE FLA	ZIP 3 4 2 8b

#### ARTICLE VIII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME NICHOLAS KONTUST	HENKO	
ADDRESS 1316 - 28 TH AVE DR		
CITY PALMETTO	STATE	ZIP 34221
NAME DAVID L GLESS MAN	•	
ADDRESS 2349 NONTFELIER R	<u> </u>	
CITY PUNTA GOEDA	STATE FLA	ZIP 33983
NAME DOMINIC F. MACINA		
ADDRESS 2669 ORACLE LANE		
CITY NORTH PORT	STATE FLA	ZIP 34286

Well Kn Im (Signature)

Was A (Signature)

Domein Min (Signature)

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:		
The above corporation, organized under the laws of the State of Florida with its register	ed office	;
as indicated in the Articles of Incorporation	ୁ 38 ଫ	
at 4305 - 19TH AVE WEST	구 2	<u> </u>
BRADENTON, FLA 34209-5126	~~	T
has named WILL IAM HEPBURN JR		
located at the aforesaid address, as its registered agent to accept service of process with	n thist	
state.	,	

(name of corporation)

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.

William Helium 9/19/05
(Signature) 9/19/05
(Date)