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(Requ	uestor's Name)	
(Addr	ess)	
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PICK-UP	☐ WAIT	MAIL
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(Doct	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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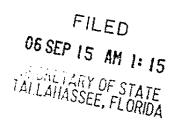
COVER LETTER

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

SUBJECT:	ADMAK		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original	ginal and one (1) copy of the art	icles of incorporation and	l a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate o Status
		<u> </u>	
FROM:	DAY D	MAWGOT e (Printed or typed)	·
	560 NW 115		
	CORAL SPRIA		३०७।
	(954) 8	71 -7 08 (

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

ARTICLES OF INCORPORATION OF ADMAK, INC.



The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE I. NAME. The name of the corporation is ADMAK, Inc., located at 560 NW 115th Way, Coral Springs, FL 33071.

ARTCLE II. DURATION. The term of existence of the corporation is perpetual.

ARTICLE III. PURPOSE. The corporation may transact any and all lawful business for which a corporation may be incorporated under the Florida General Corporation Act.

ARTICLE IV. CAPITAL STOCK. The aggregate number of shares, which the corporation has authority to issue, is 500, all of which shall be common shares of the par value of \$1.00 per share.

ARTICLE V. REGISTERED OFFICE. The street address of the initial registered office of the corporation is 560 NW 115th Way, Coral Springs, FL 33071 and the initial registered agent at such address is David Maingot.

ARTICLE VI. DIRECTOR. The corporation shall have two directors initially. The number of directors may be increased from time to time by by-laws adopted by the stockholders, but shall never be less than one.

ARTICLE VII. INITIAL DIRECTOR. The name and post office address of the members of the first Board of Directors are:

David Maingot

Raul Fabres

560 NW 115th Way

401 SW 4th Avenue #806

Coral Springs, FL 33071

Ft. Lauderdale, FL 33315

IN WITNESS WHEREOF, I have subscribed my name this <u>| C</u> day of <u>SEP</u> . 2006.

David Maingot 560 NW 115th Way Coral Springs, FL 33071

STATE OF FLORIDA

COUNTY OF BROWARD

On this \sqrt{Q} day of \sqrt{Q} , 2006, Before me, a Notary Public, dully authorized in the state and county named above to take acknowledgements, personally appeared David Maingot, to me known to be the person whose name is subscribed to the within instrument, and acknowledged the he executed the same for the purpose therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

NOTARY PUBLIC, STATE OF FLORIDA



ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for the above stated corporation, at the office stated above, I hereby accept to act in the capacity of Registered Agent and agree to comply with the previous provisions relative to keeping said office open.

Registered Agent

