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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only

N. SAMS JUN 2 1 2019



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COVER LETTER

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

SUBJECT: Automated Systems USA, Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication \$ 50.00 Articles of Incorporation and Certified Copy \$ 78.75 Total to domesticate and file \$128.75

OPTIONAL:

Certificate of Status

\$ 8.75

DM Hanson - Schuyler Roche & Crisham PC

Name (printed or typed)

180 N. Stetson Ave. Ste. 3000

Address

Chicago, IL 60601

City, State & Zip

312-565-8376

Daytime Telephone Number

debhanson@srcattorneys.com

E-mail address: (to be used for future annual report notification)

CERTIFICATE OF DOMESTICATION

The undersigne	_{d,} Laszlo K. Kulcsar	President	,
	(Name)	(Title)	;
of Autom	ated Systems, Inc.	a for	reign corporation,
n accordance v	(Corporation Name) with s. 607.1801, Florida Statutes, does her	eby certify:	
. The date or	which corporation was first formed was _	October 12	. 1989
•	ction where the above named corporation v being was	vas first formed, incorpora	
	of the corporation immediately prior to the mated Systems, Inc.	filing of this Certificate of	Domestication
	of the corporation, as set forth in its articles and 607.0401 with this certificate is Auto		•
administrat	ction that constituted the seat, siege social, ion of the corporation, or any other equivally before the filing of the Certificate of Dorullinois	lent jurisdiction under app	
6. Attached ar to s. 607.18	re Florida articles of incorporation to comp 801.	lete the domestication req	uirements pursuant
am Preside	nt . of Automated Systems,	lnc.	
and am authori so this the <u>15</u> 7		on on behalf of the corpora	ition and have done . 2019
	Nobele Gibe		
	(Authorized Sign	ature)	10 PH 2:
	Filing Fee:		
	Certificate of Domestication Articles of Incorporation and Certi	\$ 50.00	

ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

THE NAME OF THE CORPORATION SHALL BE:				
Automated Systems USA, Inc.				
ARTICLE II PRINCIPAL OFFICE THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IN Principal Address 3001 N. Rocky Point Drive E	s: Mailing Address 3001 N. Rocky Point Driv	e E		
Tampa, FL 33607	Tampa, FL 33607			
THE PURPOSE FOR WHICH THE CORPORATION IS ORGAN		19		
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·	awful business for which	<u></u>		

Title/Name Laszlo K. Kulcsar, President	Title/Name Laszlo K. Kulcsar, Director
Laszlo K. Kulcsar, Secretary	
Laszlo K. Kulcsar, Treasurer	
Title/Name	Title/Name
	,
Title/Namc	Title/Name
Title/Name	Title/Name

ARTICLE IV SHARES
THE NUMBER OF SHARES OF STOCK IS: 1,000

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS: David M. Giangrossi 5425 Park Central Ct. #115 Naples, FL 34109 ARTICLE VII INCORPORATOR THE NAME AND ADDRESS OF THE INCORPORATOR IS: David M. Giangrossi

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 AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Signature/Registered Agent

Naples, FL 34109

5425 Park Central Ct. #115

Signature/Incorporator

Date

7771

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