

P95 00000 5881

TRANSMITTAL LETTER

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL. 32314

FILED
1995 JAN 19 AM 11:40
SECRETARY OF STATE
TALLAHASSEE

SUBJECT: _____ ALLISON MOTORSPORTS, INC. _____

ENCLOSED IS AN ORIGINAL AND ONE COPY OF THE ARTICLES OF
INCORPORATION AND OUR CHECK FOR \$__70.00__

FROM; NAME _____ JERRY ALLISON _____
ADDRESS _____ 3550 RIDGEWOOD AVE _____
CITY _____ PORT ORANGE _____
STATE _____ FLORIDA 32119 _____
TELEPHONE _____ 904-767-6461 _____

300001384513
-01/19/95--01070--009
*****70.00 *****70.00

A. CHESER JAN 2 1995

ARTICLES OF INCORPORATION OF

_____ALLISON MOTORSPORTS, INC._____

FILED
1995 JUL 19 AM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I--NAME

THE NAME OF THIS CORPORATION SHALL BE _____
_____ALLISON MOTORSPORTS, INC._____

ARTICLE II--PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS
CORPORATION SHALL BE _____3550 RIDGEWOOD AVE._____
_____PORT ORANGE, FL. 32119_____

ARTICLE III--CAPITAL STOCK

THE NUMBER OF SHARES THAT THIS CORPORATION IS AUTHORIZED TO
HAVE OUTSTANDING AT ANY ONE TIME IS _____
_____60, NO PAR_____

ARTICLE IV--REGISTERED AGENT

THE NAME AND ADDRESS OF THE REGISTERED AGENT IS _____
_____JERRY ALLISON_____
_____3550 RIDGEWOOD AVE._____
_____PORT ORANGE, FL. 32119_____

CERTIFICATION OF DESIGNATION-REGISTERED AGENT/REGISTERED
OFFICE

PURSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 717.0501,
FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED
UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING
STATEMENT IN DESIGNING THE REGISTERED AGENT/REGISTERED OFFICE
IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS _____
_____ALLISON MOTORSPORTS, INC._____
2. THE NAME AND ADDRESS OF THE REGISTERED AGENT IS
NAME_____JERRY ALLISON_____
- ADDRESS_____350 RIDGEMOOD AVE_____
- CITY/STATE_____PORT ORANGE, FL. 32119_____

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.

SIGNATURE *X* *Jerry K. Allison*
DATE *X* *1-12-95*

ARTICLE V-INCORPORATORS

THE NAME(S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO
THESE ARTICLES OF INCORPORATION IS (ARE):

JERRY ALLISON
3550 RIDGEWOOD AVE
PORT ORANGE, FL. 32119

THE UNDERSIGNED INCORPORATOR(S) HAS(HAVE) EXECUTED THESE
ARTICLES OF INCORPORATION THIS FIRST DAY OF
JAN 1995

SIGNATURE * Jerry K. Allison

SIGNATURE _____

SIGNATURE _____

FILED
1995 JAN 19 AM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA