## TRANSMITTAL LETTER SEMANTED AND 15

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

Enclosed is an orl	ginal and one (1) co	opy of the articles o	of incorporation	and a check
for: \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	Filing Fee, Certified Copy & Certificate y Re (uired	
FRO		T Ackass (printed or typed)		
	720	VERONA LAK Address	GE DRIVERO	000014738;46; /03/9501138002 **131.25
		AUD FL 3	33326	******131.23
	<u>(305)</u> Daytime	389-2723 Telephone number		

(Proposed corporate name - must include suffix)

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





The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

COMPASS INTERNATIONAL INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

770 VERONA LAKE DRIVE FT. LAUD, FL 33326

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

UNE (NO PAR VALUE)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

VioleT ÁLKASS 770 VERONA LAKE DRIVE FT. LAUD, FL 33326

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

VIOLET ACKASS
720 VERONA LAKE DRIVE
FT. LAUD, FL 33326

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

I.	. The name of the corporation is:	STERNATIONAL INC.
2.	. The name and address of the registered agent and office is:	5 11
	VIOLET ACKASS	
	. O. Box or Mail Drop Box NOT ACCEPTA	RILE)
	FT. LAUD FL 3332 (CITY/STATE/ZIP)	4

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) MAY 1, 1995
(DATE)