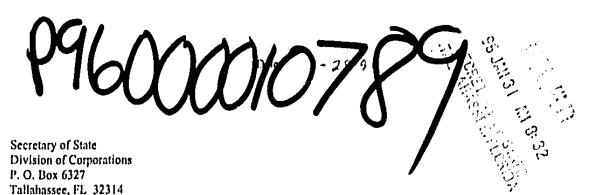
(SAMPLE LETTER OF TRANSMITTAL)



Re: OFF SHOWE ATK SYSTEMS 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 \$122.50. \$170.00

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

Very truly yours,

000001702440 -01/31/96--01030--020 +****70.00 *****70.00

(individual's name)

OFFSHORE ATR SYSTEMS INC. (name of corporation)

State of the state

MAILING ADDRESS OF CORPORATION

810 SATURIO ST. 4/6

JUPITER FL 33477

PHONE

(407) 614-6610

Area Code Number Ext.

ARTICLES OF INCORPORATION

of

	OI	
OFFSHARE ATK SYSTEMS	TIX	
The undersigned subscriber(s) to these Articles of Incorpo corporation under the laws of the State of Florida.	, ,	tent to contract, hereby form a
ARTICLE 1 - CO	ORPORATE NAME	
The name of the corporation is:		1000 1000 1000 1000 1000 1000 1000 100
DEF SHORE ATK SYSTEMS	TAX	्रिक्ट व
ARTICLE II	I - DURATION	
This corporation shall exist perpetually unless dissolved		
ARTICLE II	II + PURPOSE	
The corporation is organized for the purpose of engaging United States and the State of Florida.	in any activities or business per	rmitted under the laws of the
ARTICLE IV -	CAPITAL STOCK	
The corporation is authorized to issue Fruz RuneO	<u> 1880</u> shares (500) (of <u>ONE</u>
Dollar(s) (\$_1,00) par value Common	Stock, which shall be designa	ted "Common Shares."
ARTICLE V - INITIAL REGI	STERED OFFICE AND AGE	NT
The street address of the Initial Registered Agent office a	nd the name of the Initial Regi	stered Agent at that office is:
NAME JOHN A. APPLIZMAN SR.		
ADDRESS 810 SALURIV ST. H./		
CTIY JUPPTER		_
The principal office, if known, or the mailing adress of		
NAME JOHN A APPLEMAN JR.		
ADDRESS SID SATURN St. F/1		
CITY Suppres	FLORIDA FL	ZII 37477
· · · · · · · · · · · · · · · · · · ·	BOARD OF DIRECTORS	
This corporation shall have) directors initially. The numb ws, but shall never be less that e as follows:	per of directors may be either n one (1). The names and
NAME JOHN A. APPLEMAN JR.		
ADDRESS 810 SATURN ST. 11/6		
CITY JUPETEL	STATE FL	211 J 77477
NAME		
ADDRESS		
CITY	STATE	ZIP
NAME		
ADURESS		
TITY	CPATTI	710

PAGE 1

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FORM 215: ARTICLES OF INCORPORATION, PAGE 1

ARTICLE VII - INCORPORATORS

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

NAME JUILN A. APPLEMAN	JR.	
ADDRESS 810 SATURN ST. H.	/6	
CHY SUPPTER	STATE FL	20 33477
NAME		
ADDRESS		
CIIY	STATE	ZIP
NAMB	· · · · · · · · · · · · · · · · · · ·	
ADDRESS		
Criy	STATE!	ZIP
IN WITNESS WHEREOF, the undersigned sub day of	scriber(s) have executed these Articles of	Incorporation this 29
	Jela and	(Scal)
		(Scal)
		(Seal)

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

OFF SHORE	ATR	SVSTEMS	Tive.	
.		(name of corporation)		100 C

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at .	<u>8/0</u>	5 A 141	3 سے	٠.ــــــــــــــــــــــــــــــــــــ	11:16_				
	<u> </u>	CTIER /	<u> </u>	774	<u> </u>	 -			
has	named _	JUHN	<u> A.</u>	AP	DLEMA	, <u> </u>	tr.		
loca	ited at th	e aforesaid ac	ldress, as	its Ro	egistered A	gent to	accept s	service of	process
witl	in this s	state.							

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

And a Cent A

4