PU 3/27/96 FLORIDA DIVISION OF CORPORATIONS PUBLIC ACCESS E ( ( (H96 TO:, 33166-CONTACT: LIDIA FERNANDEZ FAX (904) 922-4000 PHONE: (305) 599-0839 FAX: (305) 592-9591 (((H96000004381))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A. NAME: A.C.B., INC. FAX AUDIT NUMBER: H96000004381 CURRENT STATUS: REQUESTED DATE REQUESTED: 03/27/1996 TIME REQUESTED: 09:44:19 CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0 NUMBER OF PAGES: 2 METHOD OF DELIVERY: FAX ESTIMATED CHARGE: \$122.50 ACCOUNT NUMBER: 071001002335 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H96000004381))) \*\* ENTER 'M' FOR MENU. \*\* 3/27/96 FLORIDA DIVISION OF CORPORATIONS 9:44 AM

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## Articles of Incorporation of A.C.B., INC.

I the undersigned subscriber to these articles of incorporation person competent to contract, do hereby associate myself for the purpose of becoming a corporation under the laws of the State of Florida, and do hereby adopt the following Articles of Incorporation.

SECTION, 1.01 NAME:

The name of the incorporation is: A.C.B., INC.

SECTION 2.01 CAPITAL STOCK AND INITIAL CAPITAL:
The maximum number of shares of stocks that this corporation is
authorized to have outstanding at any one time is one thousand shares
of one dollars par value each, no pre-emptive rights, non-descensible.
The initial capital for which this corporation will begin business
shall not be less that five hundred dollars.

SECTION 3.01 TERM OF EXISTENCE AND ADDRESS:
This corporation shall have perpetual existence and its corporate existence shall commence at the time of filing the Articles of Incorporation. The post office address of this corporation in the State of Florida shall be:

PHYSICAL ADDRESS:

MAILING ADDRESS:

PHYSICAL ADDRESS: 10831 SW 186 ST 2ND FLR MIANI, FL 33157

P.O. BOX 971577 MIAMI, FL 33197-1577

The Board of Directors may move the principal office to any address within the State of Florida.

SECTION 4.01 NAME OF DIRECTOR AND SUBSCRIBER:
The Board of Directors of this corporation shall consist of not less
than on member, initially, but may be increased from time to time,
never less than one director. The name and address of the initial
Board of Director for the first year of the corporation existence is:

ARAMIS C BEGERRA 10831 SW 186 ST 2ND FLR. MIAMI, F1 33157 1000

SECTION 5.01 NATURE OF BUSINESS:
This corporation shall engage in activity of business permitted under the laws of the United States and the State of Florida.

SECTION 6.01 RESIDENT AGENT AND ACKNOWLEDGEMENT:
In pursuance of Chapter 48.091, Florida Statues, the following is submitted in compliance with said ACT: That A.C.B., INC; desiring to organize under the laws of the State of Florida with its principal office, as we have indicated in the Articles of Incorporation at City of Miami, State of Florida, has named ARAMIS C BECERRA located at 10381 SW 186 ST 2ND FLR, MIAMI, County of Dade, State of Florida as it agent to accept service of process within this State.

PREPARED BY: ARAMIS C BECERRA 10381 SW 186 ST 2ND FLR MIAMI, FL 33157

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Page 2 of 2 ACKNOWLEDGEMENT: I, ARAMIS C BECERRA, having been named to accept a rvice of process for the above state corporation, at place designated in this certificate, hereby accept such nomination, agree to act in the aforesaid capacity, and agree to comply with the provision of said ACT relative to keeping ACCEPTED BY: ARAMIS C BECERRA In witness whereof, the subscriber has hereunto set hand and seal this 14TH day of MARCH, 1996. ANAMIS C BECERNA State of Florida County of Dade I, hereby certify that on this day before me, a Notary Public duly authorized in the State and County above named, to take acknowledgement, personally appeared ARAMIS C BECIRRA, to me well known to be the person described in the foregoing Articles of Incorporation of A.C.B., INC. who acknowledged to me that he essecuted the same freely and voluntarily and for the purpose therein expressed. WITHESS my hand and official seal, at Miami, Dade County, Florida, this 14TH day of Warch, 1996 Regine Lloret 96 Notary Public, State of Florida commission expires: OFFICIAL NOTARY SKAL REGINA LLOKET NOTARY PUBLIC STATE OF PLONIDA COMMISSION NO. CC25(809 MY COMMISSION ICP. JAN. 25,1997 33