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TRANSMITTAL LETTER

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96 DEC 30 PM 1:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: AFROCENCHECK, INC.
(Proposed corporate name - must include suffix)

300002042313--0
-12/31/96--01065--008
*****78.75 *****78.75

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: SHATRIECE WILLIAMS
Name (printed or typed)

10075 SW 154 TERRACE
Address

MIAMI, FLORIDA 33157
City, State & Zip

(305) 235-4715
Daytime Telephone number

NOTE: Please provide the original and one copy of the article

1-6-97

ARTICLES OF INCORPORATION

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:

AFROCEN CHECK, INC.

ARTICLE II PRINCIPAL OFFICE

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

10875 SW 154 TERRACE
MIAMI FLORIDA 33157

ARTICLE III SHARES

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

TEN THOUSAND SHARES (10,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

SHATRIECE WILLIAMS
10875 SW 154 TERRACE
MIAMI, FLORIDA 33157

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STATE

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):

SHATRIEE WILLIAMS
10875 SW 154 TERRACE
MIAMI, FLORIDA 33157

TYESA CANADY-WORTHY
2317 NORTH CONGRESS AVENUE
SUITE NO. 34
BOYNTON BEACH, FLORIDA 33426

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

17 day of DECEMBER, 19 96.

(An additional article must be added if an effective date is requested.)

Shatriee Williams
Signature

Tyesa Canady-Worthy
Signature

Signature

Notarization is not required

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.

1. The name of the corporation is: AEROCENGHECK, INC.

2. The name and address of the registered agent and office is:

SHATRICE WILLIAMS
(NAME)

10875 SW 154 TERRACE
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

MIAMI, FLORIDA 33157
(CITY/STATE/ZIP)

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.

Shatricia Williams
(SIGNATURE)

12/17/96
(DATE)

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

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