

TRANSMITTAL LETTER

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

**SUBJECT:      Advanced Information Technologies Inc.**

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

**\$131.25 - Filing Fee, Certified Copy and Certificate**

**FROM:**

**John Olive  
16085 NW 64<sup>th</sup> AVE # 104  
Miami Lakes, Florida 33014  
305-821-0370**

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TALLAHASSEE, FLORIDA

APR - 2 1997

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# ARTICLES OF INCORPORATION

*The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.*

## ARTICLE I NAME

The name of the corporation shall be:

Advanced Information Technologies Inc.

## ARTICLE II PRICIPAL OFFICE

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

16085 NW 64<sup>TH</sup> Ave #104, Miami Lakes, Florida, 33014

## ARTICLE III SHARES

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

One Thousand (1000) shares

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:


John Olive at 16085 NW 64<sup>TH</sup> Ave #104, Miami Lakes, Florida, 33014

## ARTICLE V INCORPORATOR

The name and street address of the incorporator to these Article of Incorporation is:

John Olive at 16085 NW 64<sup>TH</sup> Ave #104, Miami Lakes, Florida, 33014

The undersigned incorporator has executed these Articles of Incorporation this 27<sup>th</sup> day of March, 1997.

  
\_\_\_\_\_  
John Olive

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**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 Advanced Information Technologies Inc.
2. The name and address of the registered agent and office is:

**John Olive  
16085 NW 64<sup>th</sup> AVE # 104  
Miami Lakes, Florida 33014**

*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.*

  
John Olive

3-27-97  
Date

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