

**PAT00049876**

Requestor's Name  
 890 S.W. 87 AVENUE, SUITE: 16  
 Address  
 MIAMI, FLORIDA 33174 (305)552-5973  
 City/State/Zip Phone #  
 LOCAL REPRESENTATIVE TALLAHASSEE

000002201880--8  
 -05/04/97--01097--018  
 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ATED CORPORATION  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

**FILED**  
 97 JUN -5 PM 3:36  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

- Walk in   
  Pick up time 2:00   
  Certified Copy  
 Mail out   
  Will wait   
  Photocopy   
  Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RECEIVED  
 97 JUN -4 PM 1:20  
 DIVISION OF CORPORATION

JUN 4 BSB  
 W97-13113

Examiner's Initials	
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FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

June 4, 1997

LAZARUS

SUBJECT: ATED CORPORATION  
Ref. Number: W97000013113

We have received your document for ATED CORPORATION and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6925.

Brenda Baker  
Corporate Specialist

Letter Number: 797A00030267

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97 JUN -5 PM 2: 37  
DIVISION OF CORPORATION

**ARTICLES OF INCORPORATION**

**FILED**  
97 JUN -5 PM 3:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE 1-NAME**

The name of the Corporation is  
ATED CORPORATION OF MIAMI

**ARTICLE 2-PURPOSE OF CORPORATION**

The Corporation shall engage in any activity of business permitted under the laws of the United States and of the State of Florida.

**ARTICLE 3-PRINCIPAL OFFICE**

The address of the principal office of this Corporation is:

11014 SW 4 ST  
MIAMI, FL 33174,

**ARTICLE 4-INCORPORATOR**

The name and street address of the incorporator of this Corporation is:

ENERY DIAZ  
11014 SW 4 ST  
MIAMI, FL 33174

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

1 day of 6, 1997.

Emergy Diaz

\_\_\_\_\_

**ARTICLE 5-OFFICERS**

The officers of the Corporation shall be:

President: ENERY DIAZ

11014 SW 4 ST MIAMI, FL 33174

**ARTICLE 6-DIRECTOR(S)**

The Director(s) of the Corporation shall be:

ENERY DIAZ

**ARTICLE 7-SHARES**

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

100 SHARES AT \$ 1.00 PAR VALUE

**ARTICLE 8-REGISTERED OWNERS**

The Corporation, to the extent permitted by law, shall be entitled to treat the person in whose name any share or right is registered on the books of the Corporation as the owner thereof, for all purposes, and except as may be agreed in writing by the Corporation, the Corporation shall not be bound to recognize any equitable or other claim to, or interest in, such share or right on the part of any other person, whether or not the Corporation shall have notice thereof.

**ARTICLE 9-EFFECTIVE DATE**

These Articles of Incorporation shall be effective immediately upon approval of the Secretary of State, State of Florida.

**ARTICLE 10-AMENDMENT**

The Corporation reserves the right to amend, alter, change or repeal any provision contained in these Articles of Incorporation, or in any amendment hereto, or to add any provision to these Articles of Incorporation or to any amendment hereto, in any manner now or hereafter prescribed or permitted by the provisions of any applicable statute of the State of Florida, and all rights conferred upon shareholders in these Articles of Incorporation or any amendment hereto are granted subject to this reservation.

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, 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:

ATED CORPORATION OF MIAMI

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

ENERY DIAZ 11014 SW 4 ST MIAMI, FL 33174

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 \_\_\_\_\_

*Emery Diaz*

DATE \_\_\_\_\_

*6-1-97*

97 JUN -5 PH 3:36  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED