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97 JUL 23 AH 9:20

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

SUBJECT:	CT: ACIREMA, DIC (Proposed corporate name - must include suffix)					
Enclosed is an original	i and one(1) copy of the article:		*****131。	446688 701012001 .25 ****131.25		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	P\$131.25 Filing Fee, Certified Copy & Certificate			
		ADDITIONAL CO	PY REQUIRED			
FROM:	ACIREMA, IVE	rinted or typed)				
	P.O. BOX 108			•		
	TACLAHASSEE	Address FLA 323	SisiAlū V	3 등 평		
		State & Zip	DH OF (RECEIVED		
	850-422-0971					
	Daytime T	elephone number	RAIIU	RECEIVED		
				•		

NOTE: Please provide the original and one copy of the articles.



97 JUL 23 AM 9: 20

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.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE	I	NAME		Λ
			_	 <i>I</i> 1 1

The name of the corporation shall be: ACIREMA, INC

ARTICLE .	TT .	PRINCIPAL	OFFICE
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The principal place of business and mailing address of this corporation shall be:

P.O. BOX 10847 TALLAHASSEE FL 32302

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: (1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

BIII WILLIAMS 346 HUNTERS CROSSING TALLAHASSEE, FEA 32312

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

BILL WILLIAMS P.O. BOX 10847 TACLAHASSEE, FC 32302

Signature/incorporator

7-23-97

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

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

7-23-97

Signature/Registered Agent