P98 TRAISM TAILETTER 699

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

500002571275---S -06/24/98--01076--009 *****78.75 ******78.75

SUBJECT: ACMA	(NORTH AMERICA) II	ЛС .		
SUBJECT: ACMA	(Proposed corpor	ate name - must include suf	fix)	
Enclosed is an original a	and one(1) copy of the articles	s of incorporation and a c	check for:	
 Подо 00	₹2 \$78.75	\$122.50	□ \$131.25	
☐ \$70.00 Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
TimigT	& Certificate	& Certified Copy	Certified Copy	
			& Certificate	
•	e e	ADDITIONAL CO	PY REQUIRED	
FROM: ^I	DAVID JOHN FARR, PR	ESIDENT		
	Name (P	rinted or typed)	•	
20	00 N. W. 55 CT.		 4	
2 <u>8</u>		Address	98 J SECR ALLA	
			ARE J.	
Ft	. Lauderdale, Flor		FIL JUN 24 KHASSE	
	City,	State & Zip		
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UTHORIZATION BY PHO	VE TO !			
ORSECT WAY	· ·			
KTE 6/25/98		•	: n 1 2	
OC. EXAM TH		•	TH-6/25/4	
OC. EXAM THE NOTE: Please provide the original and one copy of the articles.				

CEIGINAL

ARTICLES OF INCORPORATION (PROFIT) OF

ACMA (NORTH AMERICA), INC.

David John Farr undersigned, being of the age of eighteen (18) ye	ars
or more, does hereby make and acknowledge these Articles of Incorporation under a	ınd
by virtue of the laws of the State of Florida	
1. The name of the Corporation is. ACMA (NORTH AMERICA), INC.	
2. The number of shares the corporation is authorized to issue shall be	
shares all of one class designated as common stock.	
3. The street address and county of the initial registered office of the corporation is	
2800 N. W. 55 Ct.	
Ft. Lauderdale, Florida 33309	
and the name of the initial registered agent at this address is	
Hilda Sanchez	
**The Registered office is the same as the Principal Of	fic
4. The number of directors constituting the initial board of directors shall be	nd
l) (David John Farr, President	
2800 N. W. 55 Ct., Fort Lauderdale, Florida 33309	
2) Garry Herbert Hunt, Vice-President	
2800 N. W. 55 Ct., Fort Lauderdale, Florida 33309	
3) Ronal Crabtree, Secretary	_
2800 N. W. 55 Ct., Fort Lauderdale, Florida 33309	_
4)	

;3. 10 the fullest exte	in permitted byFLORIDA	_(9 *****)
Business Corporation	Act as it exists or may hereafter be amended, no person	ı who is
serving-or who has se	erved as a director of the corporation shall be personally	liable to
the corporation or an	y of its shareholders for monetary damages for breach o	f duty as a
director. No amenda	nent or repeal of this Article nor the adoption of any pro	vision of
these Articles of Inco	rporation inconsistent with this Article shall eliminate or	r reduce the
protection granted he	erein with respect to any matter that occurred prior to su	ıch ·
amendment, repeal, o	or adoption.	
	•	
6. The corporation e	elects to have pre-emptive rights.	
, i	of the corporation are entitled to accumulate their votes	
1	lment shall be made to this Article when the number of s	
voting against the pr	oposal to amend would be sufficient to elect a director b	ıy
cumulative voting an	d such shares are entitled to be voted cumulatively for the	ne election
of directors.		
; •		
8. The name and ad	dress of the incorporator is <u>David John Farr</u>	_
, 2800 N.	W. 55 Ct., Ft. Lauderdale, Florida	<u>33309</u>
/		
11/1/2		
17/MWd /MW	6-18-98	

Date

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 c	orporation is <u>ACMA (NORTH AMERICA), INC</u>		-
2" The name and add	ress of the registered agent and office is:		- - =:
2. The name and add			
	Hilda SAnchez	9. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	
	(NAME)	8 JUN 24 ECRETAR LLAHASS	-
	2800 N. W. 55 Ct. (P. O. Box or Mail Drop Box NOT ACCEPTABLE)	24 ARY ASSE	
	Et Tandordalo Elemida 22200	PH 3	
	Ft. Lauderdale, Florida 33309 (City/State/Zip)		
t	·	-	

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 agrée 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.

	Hon .	6/18/98 .	
3.	(SIGNATURE)	/ (DATE)	