TRANSMITTAL LETTER

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

60000276566--3 -02/05/99--01037--007 ****131.25 *****87.50

SUBJECT:	AFM, Inc. (Proposed co	le suffix)	<u> </u>	
Enclosed is an original \$70.00 Filing Fee	nal and one(1) copy of the articles \[\square \frac{1}{2} \\$78.75 Filing Fee	s of incorporation and a current of the second of the seco	check for: \$131.25 Filing Fee,	
1 milg 1 cc	& Certificate	& Certified Copy ADDITIONAL CO	Certified Copy & Certificate	
FROM:	Timothy Alan Lundy Name (Pri	inted or typed)	DIVIJION CI FALLAHAS	99 FEB
	Address Lakeland, FL 33804-3496 City, State & Zip 941 815-1756		SSEE, FLORIDA	8 M 9: 15

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

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 9, 1999

F 18 4

TIMOTHY ALAN LUNDY P.O. BOX 93496 LAKELAND, FL 33804

SUBJECT: AFM, INC.

Ref. Number: W99000003198

We have received your document for AFM, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(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 a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of 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 (850) 487-6878.

Letter Number: 299A00005625

Alan Crum Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF INCORPORATION		_	
The undersigned incorporator, for the purpose of forming a corporation und Business Corporation Act, hereby adopts the following Articles of Incorpora	der the Florida ation.	\ \ 	
ARTICLE I NAME		_	
The name of the corporation shall be:		- <u>-</u>	ம
AFM Ride Works, Inc.		ALLAHA	e n
ARTICLE II PRINCIPAL OFFICE	1 111	SSE	∞ ;
The principal place of business and mailing address of this corporation 940 Fenton Lane, #32 Lakeland, FL 33809	n shall be:	E, FLORIDA	M 9: 15
P.O. Box 93496			<u>5</u> ග
Lakeland, FL 33804-3496 ARTICLE III SHARES	** .		5
The number of shares of stock that this corporation is authorized to h	ave outstanding at a	ny one time i	S.
100 Share @ No Par Value		三	
ARTICLE IV INITIAL REGISTERED AGENT AND The name and Florida street address of the initial registered agent are Timothy Alan Lundy 940 Fenton Lane, #32 Lakeland, FL 33809	<u>STREET ADDR</u>	ESS	
ARTICLE V INCORPORATOR			
The <u>name and address</u> of the incorporator to these Articles of Incor	poration are:	-	
Timothy Alan Lundy 940 Fenton Lane, #32 Lakeland, FL 33809		년 일 대	
3003	2-2-99	=	
Signature/Incorporator	D	eate	

(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

Signature/Registered Agent

2-2-99

Date

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