TRANSMITTAL LETTER SILED

99 APR -1 PM 12: 03

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

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UBJECT:	(Proposed corpo	rate name - must include suffix	
nclosed is an origina \$70.00 Filing Fee	al and one(1) copy of the artic \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	s87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL COPY REQUIRED	

FROM:	MARTIN RAFAEL DAGER
	Name (Printed or typed)
	805 RAVENS CR. # 203
	Address
	ALTAMONTE SPRINGS, FL 32714
,	City, State & Zip
,	•
	(407) 774-7495
	Daytime Telephone number

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

PH/16/99/

*ARTICLES OF INCORPORATION

obligations of my position as registered agent

Signature/Registered Agent

The undersigned incorporator, for the purpose of forming a corporation under the Flor Business Corporation Act, hereby adopts the following Articles of Incorporation.	FII_EU
ARTICLE I NAME The name of the corporation shall be:	- APR -1 PM 12: 03
ADUPRIMEX , INC.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:	
805 RAVENS Cr. # 203 ALTAMONTE SPRINGS , FLORIDA 32714	
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstar	nding at any one time is:
1,000.00 SHARES.	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET AT The name and Florida street address of the initial registered agent are:	ADDRESS
MARTIN RAFAEL DAGER 805 RAVENS Cr. #203 ALTAMONTE SPRINGS , FLORIDA 32714 ARTICLE V INCORPORATOR	
805 RAVENS Cr. # 203 VICE-PRE	STURKT
ALTAMONTE SEKTINGS ETIONIDA "OSTILA	RETARY
Mastin 2. Dages 2/1	9/99
Signature/Incorporator	Date
(An additional article must be added if an effective date is	s requested.)
Having been named as registered agent and to accept service of process for the above stated this certificate, I hereby accept the appointment as registered agent and agree to act in this continues.	l corporation at the place designated in 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