

TRANSMITTAL LETTER

P990000062059

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

SUBJECT: Access ... Trading Inc.
(Proposed corporate name - must include suffix)

200002923822--5
-07/06/99--01113--005
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Adrian Muller
Name (Printed or typed)

1525 NW 167th Street, Suite 155B
Address

Miami, FL 33169
City, State & Zip

(800) 337-5776
Daytime Telephone number

FILED
99 JUL -6 AM 11:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

B. BROOK JUL 13 1999

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.

ARTICLE I NAME

Access Trading Inc.

ARTICLE II PRINCIPAL OFFICE

1525 NW 167th Street, Suite 155B, Miami, Florida 33169

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: **1,000**

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

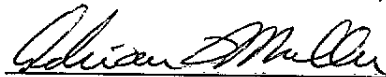
The name and Florida street address of the initial registered agent are:

Adrian Muller
1525 NW 167th Street, Suite 155B, Miami, Florida 33169

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

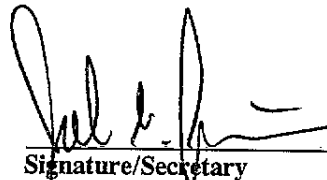
Adrian Muller
1525 NW 167th Street, Suite 155B, Miami, Florida 33169

 Date 6/29/1999
Signature/Incorporator

(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.

 Date 6/29/1999
Signature/Registered Agent

 Date 6/29/1999
Signature/Secretary

FILED
99 JUL -6 AM 11:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA