## TRANSMITTAL LETTER

## P 99000086087

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

100002997511--6 -09/27/99--01096--002 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:	ALCIANCE PE	- IKOLEOM II	ve.	<u> _</u> ':
	(Proposed corp	orate name - must include suf	fix)	99 SEP 27 AM 7: 4.0
Enclosed is an origin	al and one(1) copy of the artic	les of incorporation and a	check for:	STATE 7: 4.
□ \$70.00 Filing Fee	₹78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	A. C.
FROM	: ALLIANCE PE	TROLEUM IN TO Thinted or typed)	<u>c.</u>	
	537 NORTH SEMORAN BLVD Address			w
	ORLANDO, FL - 32807 City, State & Zip			
	ЧоЯ - 380 - Daytime I	2646 elephone number	····	

F. CHIESSER SEP 2 9 1999

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

## **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  The name of the corporation shall be:  ALLIANCE PETROLEUM II	NC.	99 SEP 27 SECHETARY
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address  537 NORTH SEMORAN BLVD,	*	AM 7: 40 EE, FLORIDA
ARTICLE III SHARES  The number of shares of stock that this corporation  ONE THOUSEND SHARES		time is:
ARTICLE IV INITIAL REGISTERED AT The name and Florida street address of the initial results	registered agent are:	
ARTICLE V INCORPORATOR  The name and address of the incorporator to these RABWAN B. CHOWDHURY	e Articles of Incorporation are:	
537 N. SEMORAN BLVD,	SEPTEMBER - 2	2-1999
Signature/Incdrpofator	Date	

(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

SEPTEMBER - 22- 1999 Date