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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

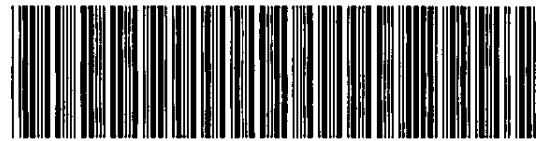
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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STATE DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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K. SALY
OCT -7 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ATM OF AMERICA, INC

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SABAH AMMOURI

Name of Person

ATM OF AMERICA, INC.

Firm/Company

24911 JOHN R. ROAD

Address

HAZEL PARK, MICHIGAN 48030

City/State and Zip code

LYDIA@ATMOFAMERICA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SABAH AMMOURI

Name of Person

at (248) 932-5400

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. ATM OF AMERICA, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. MICHIGAN 3. 38-3636744
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. NOVEMBER 28, 2001 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 24911 JOHN R ROAD HAZEL PARK, MICHIGAN 48030
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 24911 JOHN R ROAD HAZEL PARK, MICHIGAN 48030
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: REGISTERED AGENTS INC.


Office Address: 3030 N. Rocky Point Drive, STE 150A

TAMPA, Florida 33607
(City) (Zip code)

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9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

 Bill Havre/Secretary/Registered Agents Inc.
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: SABAH AMMOURI

Address: 24911 JOHN R ROAD

HAZEL PARK, MI 48030

Vice Chairman: LYDIA SITTO

Address: 24911 JOHN R ROAD

HAZEL PARK, MI 48030

Director: JASON SITTO

Address: 24911 JOHN R ROAD

HAZEL PARK, MI 48030

Director: _____

Address: _____

B. OFFICERS

President: SABAH AMMOURI

Address: 24911 JOHN R ROAD

HAZEL PARK, MI 48030

Vice President: LYDIA SITTO

Address: 24911 JOHN R ROAD

HAZEL PARK, MI 48030

Secretary: JASON SITTO

Address: 24911 JOHN R ROAD HAZEL PARK, MI 48030

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

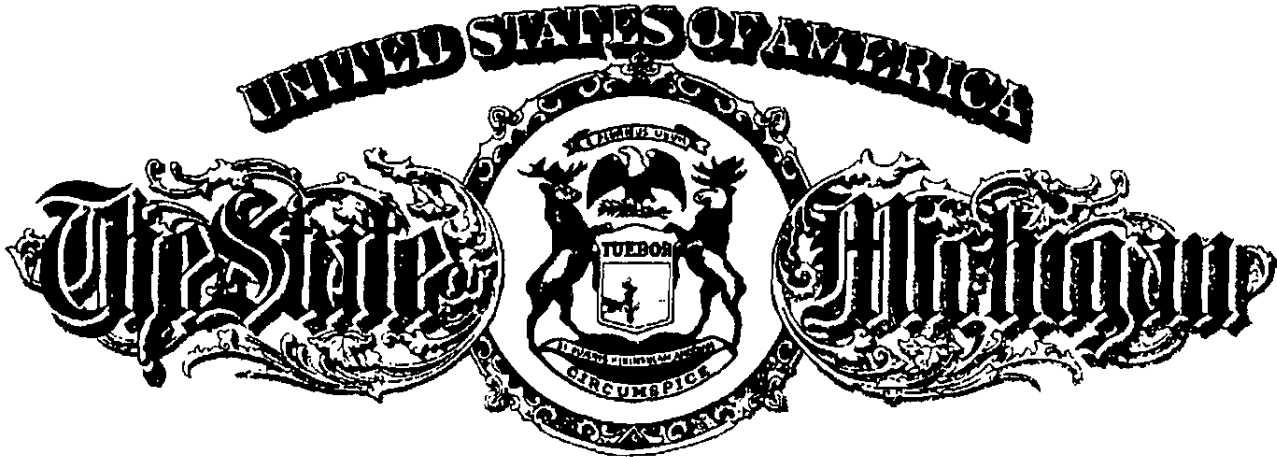
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. SABAH AMMOURI

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA



Department of Licensing and Regulatory Affairs
Lansing, Michigan

This is to Certify That

ATM OF AMERICA, INC.

was validly incorporated on November 29, 2001, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

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 TALLAHASSEE, FLORIDA
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Sent by Facsimile Transmission
1414292

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 30th day of September, 2016.

Julia Dale

Julia Dale, Director
Corporations, Securities & Commercial Licensing Bureau