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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

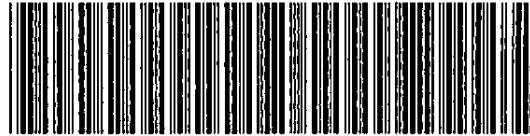
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burea MAR 13 2012

COVER LETTER

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

SUBJECT: E + E CONSULTING ENGINEERING, INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: E + E CONSULTING ENGINEERING, INC
Name (Printed or typed)

1400 E OAKLAND PARK BLVD, SUITE 108
Address

OAKLAND PARK, FL, 33334
City, State & Zip

954-566-9708
Daytime Telephone number

andreshollmann@ee-ce.net
E-mail address: (to be used for future annual report notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: **E + E CONSULTING ENGINEERING, INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1400 E OAKLAND PARK BLVD
SUITE 108
OAKLAND PARK, FL 33334

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any and all lawful bussiness

ARTICLE IV SHARES

The number of shares of stock is: **1,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Andres M. Hollmann, P**
Address: **1800 N Bayshore Drive Apt 903**
Oakland Park, FL 33309

Name and Title: **Eugenio Erquiaga, VP**
Address: **1400 E Oakland Park Blvd**
Suite 108
Oakland Park, FL 33334

Name and Title: **Carmenza I Ruiz, Mngr**
Address: **1400 E Oakland Park Blvd**
Suite 108
Oakland Park, FL 33334

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: **Andres M. Hollmann**
Address: **1800 N Bayshore Dr, Apt 903**
Miami, FL 33132

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: **Andres M. Hollmann**
Address: **1800 N bayshore Dr, Apt 903**
Miami, FL 33132

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

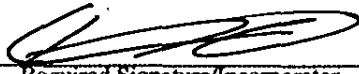


Required Signature/Registered Agent

March 8, 2012

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.



Required Signature/Incorporator

March 8, 2012

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA