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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 APR 23 PM 4:40

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**COVER LETTER**

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

SUBJECT: ANDEAN ELECTRONIC EQUIPMENT AND SUPPLIES, 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: ROBERTO BIANCHI  
Name (Printed or typed)

8930 W STATE ROAD 84, STE 156  
Address

DAVIE, FL 33324  
City, State & Zip

\_\_\_\_\_  
Daytime Telephone number

RBIANCHI630@GMAIL.COM  
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: ANDEAN ELECTRONIC EQUIPMENT AND SUPPLIES, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8930 W STATE ROAD 84  
STE 156  
DAVIE, FL 33324

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

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**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ADAN GONZALEZ P  
Address: 8930 W STATE ROAD 84  
STE 156  
DAVIE, FL 33324

Name and Title: CRISTOBAL SANCHEZ, VP  
Address: 8930 W STATE ROAD 84  
STE 156  
DAVIE, FL 33324

Name and Title: ROBERTO BIANCHI, SEC  
Address: 8930 W STATE ROAD 84  
STE 156  
DAVIE, FL 33324

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

(conti.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: ROBERTO BIANCHI  
 Address: 8930 W STATE ROAD 84 STE 156  
DAVIE, FL 33324

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ROBERTO BIANCHI  
 Address: 8930 W STATE ROAD 84 STE 156  
DAVIE, FL 33324

*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*

Roberto Bianchi 21 APR 14  
 Required Signature/Registered Agent 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.*

Roberto Bianchi 21 APR 14  
 Required Signature/Incorporator Date