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To:

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From:

Account Name : ARES & COMPANY, C.P.A., P.A.

Account Number : 120000000268

: (305)229-8256

Phone Fax Number

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FLORIDA PROFIT/NON PROFIT CORPORATION ALL COMPUTER REPAIR, CORP.

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### ARTICLES OF INCORPORATION

OF

# ALL COMPUTER REPAIR, CORP.

THE UNDERSIGNED has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

#### ARTICLE I

The name of this corporation shall be:

### ALL COMPUTER REPAIR, CORP.

### ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

### ARTICLE III

The general nature of the business and objects and purpose proposed to be transacted and carried on by this corporation are to do any and all of the things, as fully and to the same extent as natural persons might do, viz:

PREPARED BY: ARES & COMPANY, C.P.A., P.A.

3636 SW 87<sup>TH</sup> AVE. MIAMI, FL. 33165 PH: (305) 229-8256 FAX: (305) 229-8252

Transact any and all lawful business.

(1) Said corporation shall further have powers:

To have perpetual succession by its corporate name,

## ALL COMPUTER REPAIR, CORP.

#### ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 100 shares, having an individual par value of US\$10.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

### ARTICLE V

The name and street address of the initial Registered Agent of this corporation shall be:

WALTER J. MELONI 1931 NE 147<sup>TH</sup> LANE NORTH MIAMI, FL. 33181

The principal place of business is:

Mailing address shall be:

1931 NE 147<sup>TH</sup> LANE NORTH MIAMI, FL. 33181

14651 BISCAYNE BLVD. APT. 201 NORTH MIAMI, FL. 33181

### ARTICLE VI

The initial Board of Directors & Shareholders shall be composed by ONE (1) person whose name and address is:

WALTER J. MELONI - 1931 NE 147<sup>TH</sup> LANE NORTH MIAMI, FL. 33181

PRESIDENT

100% SHAREHOLDER

The name and address of the incorporator executing these Articles of Incorporation is:

WALTER J. MELONI 1931 NE 147<sup>TH</sup> LANE NORTH MIAMI, FL. 33181

IN WITNESS WHEREOF, the undersigned incorporators have executed these Articles of Incorporation this 3<sup>RD</sup> day of September, 2014.

WALTER J. MELONI INCORPORATOR/PRESIDENT

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the law of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the Corporation is:

### ALL COMPUTER REPAIR, CORP.

2. The name and address of the Registered Agent and office is:

WALTER J. MELONI 1931 NE 147<sup>TH</sup> LANE NORTH MIAMI, FL. 33181

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:

WALTER J. MELON

DATE:

9/3/14

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FLORIDA DEPARTMENT OF STATE Division of Corporations

ARES & COMPANY

September 4, 2014

SUBJECT: ALL COMPUTER REPAIR, CORP

REF: W14000054065

We received your electronically transmitted document However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott Regulatory Specialist II New Filings Section FAX Aud. #: H14000206542 Letter Number: 714A00018905

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