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(Requestor's Name)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

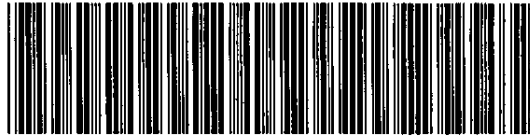
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(Business Entity Name)

\_\_\_\_\_  
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DIVISION OF CORPORATIONS

COVER LETTER

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

16 APR 18 AM 11:23  
FLORIDA STATE  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

SUBJECT: We Are IT, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> \$70.00<br>Filing Fee | <input checked="" type="checkbox"/> \$78.75<br>Filing Fee<br>& Certificate of Status | <input type="checkbox"/> \$78.75<br>Filing Fee<br>& Certified Copy | <input type="checkbox"/> \$87.50<br>Filing Fee,<br>Certified Copy<br>& Certificate of<br>Status |
| <b>ADDITIONAL COPY REQUIRED</b>                |  |  |   |

FROM: Kjartan Hrannarsson  
Name (Printed or typed)

3409 NW 9TH AVE, Suite 1103  
Address

Oakland Park, FL. 33309  
City, State & Zip

954-533-9285  
Daytime Telephone number

KJ@POWERMELLON.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: We Are IT, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal **street** address

Mailing address, if different is:

3409 NW 9TH AVE, suite 1103

Oakland Park, FL. 33309

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: We Are IT is a professional computer hardware and software reseller and provides computer integration and repair services.

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**ARTICLE IV SHARES**

The number of shares of stock is: 100.

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

Name and Title: Marilyn Oliva, CEO

Name and Title: Kjartan Hranarsson, President

Address 3409 NW 9TH AVE, suite 1103

Address: 3409 NW 9th Ave, Suite 1103

Oakland Park, FL. 33309

Oakland Park, FL. 33309

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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: Kjartan Hrannarsson  
 Address: 3409 NW 9TH ave, suite 1103  
Oakland Park, FL. 33309

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**ARTICLE VII INCORPORATOR**

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

Name: Kjartan Hrannarsson  
 Address: 3409 NW 9TH AVE, suite 1103  
Oakland Park, FL. 33309

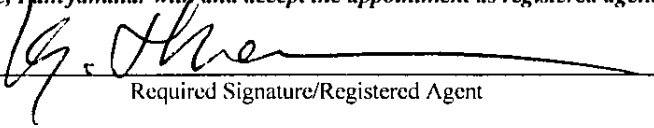
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 04.12.2016 (OPTIONAL)

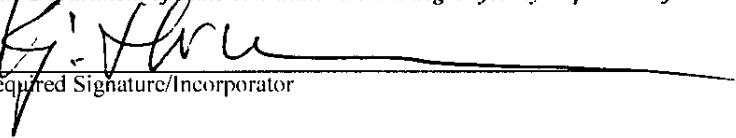
**(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)**

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

 04.12.2016  
 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.*

 04.12.2016  
 Required Signature/Incorporator Date