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

DOC. EXAM _ 7-c

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SUBJECT:	7	SN INFORM	POTATION TECHNOLOGY, INC. porate name - must include suffix)	
Enclosed is an	ı origin	al and one(1) copy of the arti	icles of incorporation and a check for:	00 MAR 15 PM 12: 11
☐ \$70 Filing		\$78.75 Filing Fee & Certificate of Status	S78.75 S87.50 SFiling Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED	* *****
F	ROM:	JOSE SAY	CHEZ NUNEZ De (Printed or typed)	3
		15236 S.V	J. ALA STREET	-
		MIAMI, FL	33146 City, State & Zip	,
		305 38 Dayti	3 46 95 me Telephone number	-
Even				

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I	I NAME

The name of the corporation shall be:

TSN INFORMATION TECHNOLOGY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

15236 S.W. III Street HIAMI, FL 33,196

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Francesca Sanchez-Fonseca

15236 S.W. 111 Street

33196 Miami, FL

INCORPORATOR ARTICLE V

The name and address of the incorporator to these Articles of Incorporation are:

Sew 111 15236

33196 Jose MiAHi.

(An additional article must be added if an effective date is requested.)

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/Registered Agent