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TRANSMITTAL LETTER

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

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-04/05/00--01075--016
*****78.75 *****78.75

SUBJECT: TECHNISOL CORP.
(Proposed corporate name - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 APR -5 AM 8:15

FILED

Enclosed is 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: CARLOS E. PEREIRA
Name (Printed or typed)

8124 HARDING AVE SUITE 10
Address

MIAMI BEACH, FL 33141
City, State & Zip

305-868-7914
Daytime Telephone number

F. CHAPMAN APR 10 2000

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:

TECHNISOL CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8124 HARDING AVE SUITE 10
MIAMI BEACH, FL 33141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES OF GOODS AND SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

CARLOS E. PEREIRA 8124 HARDING AVE SUITE 10
MIAMI BEACH FL 33141

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

CARLOS E. PEREIRA 8124 HARDING AVE SUITE 10
MIAMI BEACH FL 33141

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

CARLOS E. PEREIRA 8124 HARDING AVE SUITE 10
MIAMI BEACH FL 33141

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

Signature/Incorporator

Date

Date

00 APR -5 AM 8:45

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/3/2000

4/3/2000