

TRANSMITTAL LETTER

P00000063220

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

900003304749--0  
-06/26/00--01116--017  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: INVERSIONES 2020 DE VENEZUELA Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: MARIA C. VENEGAS  
Name (Printed or typed)

4736 NW 114 AVE #101  
Address

MIAMI FL 33178  
City, State & Zip

305 4687932  
Daytime Telephone number

FILED  
00 JUN 26 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

CB  
6-29-00  
2

# 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:

INVERSIONES 2020 DE VENEZUELA INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4736 NW 114 AVE #101 MIAMI FL 33178

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DISTRIBUTION, SALES, TRAINNING AND SUPPORT FOR  
SOFTWARE

## ARTICLE IV SHARES

The number of shares of stock is:

100 STOCKS

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

MARIA C. VENEGAS 4736 NW 114 AVE #101 MIAMI FL 33178  
JOSE J. VENEGAS 4736 NW 114 AVE #101 MIAMI FL 33178

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

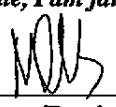
MARIA C. Venegas  
4736 NW 114 AVE #101  
MIAMI FL 33178

## ARTICLE VII INCORPORATOR

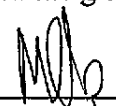
The name and address of the Incorporator is:

MARIA C. Venegas  
4736 NW 114 AVE #101  
MIAMI FL 33178

\*\*\*\*\*  
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

  
Signature/Registered Agent

6/22/00  
Date

  
Signature/Incorporator

6/22/00  
Date

FILED  
00 JUN 26 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA