

Florida Department of State

Division of Corporations
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Katherine Harris, Secretary of State

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Toz

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940

Fax Number : (516)935-3940

FLORIDA PROFIT CORPORATION OR P.A.

P & P Technologies, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

DIVISION OF CALL CRAFFIDAS

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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

P & P Technologies, Inc.

Corporate Purpose: To perform consulting work under the general business laws of Florida

ARTICLE II PRINCIPAL OFFICE

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

P & P Technologies, Inc. 3068 FOXHILL CIRCLE - #205 APOPKA, FL 32703

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ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ASHWIN PANCHAL 3068 FOXHILL CIRCLE - #205 APOPKA, FL 32703

Prepared By:
Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

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SIGNATURE

HUBCO INCORPORATIONS

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ARTICLES V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

ASHWIN PANCHAL 3068 FOXHILL CIRCLE - #205 APOPKA, FL 32703

The undersig	ened incor	porator(s) l	nas(have) execut	ted these Article	es of Incorporation this
11	đay of	Oct.	2000		
18h	uala	9_			

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

2. The name and address of the re	eristered agent and office is:		
THE THINK WILL SHEET AND AN ELLE LE	Substitute and office to:		
	ASHWIN PANCHAL		
	Name	_	
	3068 FOXHILL CIRCLE -#205		
	(P.O. Box or Mail Drop Box NOT Acceptable)	_	
•	APOPKA, FL 32703		
	(City / State / Zip)		
corporation at the place design agent and agree to act in this c	ed agent and to accept service of process for the above stated ated in this certificate, I hereby accept the appointment as rejapacity. I further agree to comply with the provisions of all the second secon	gistered ie statutes	
corporation at the place design agent and agree to act in this c	ated in this certificate, I hereby accept the appointment as re apacity. I further agree to comply with the provisions of all th plete performance of my duties, and am familiar with and acc	gistered ie statutes	SECRETARY OF STATE
corporation at the place design agent and agree to act in this co relating to the proper and comp	ated in this certificate, I hereby accept the appointment as re apacity. I further agree to comply with the provisions of all th plete performance of my duties, and am familiar with and acc	gistered the statutes cept the CONTROL OF CONTROL CONT	SECRETARY OF STATE
corporation at the place design agent and agree to act in this correlating to the proper and comp	ated in this certificate, I hereby accept the appointment as re apacity. I further agree to comply with the provisions of all th plete performance of my duties, and am familiar with and acc	gistered the statutes cept the CONTROL OF CONTROL CONT	SECRETARY OF STATE