

TRANSMITTAL LETTER

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

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-01/03/01--01060--017
*****78.75 *****78.75

SUBJECT: ALLCOMP SOLUTIONS 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: CLÁUDIA C. MOREIRA
Name (Printed or typed)

15760 BULL RUN RD #3719
Address

MIAMI LAKES - FL - 33014
City, State & Zip

305 - 389 3294
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JAN -3 AM 8:50

FILED

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

T. Burch JAN 9 2001

ARTICLES OF INCORPORATION
OF
ALLCOMP SOLUTIONS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JAN -3 AM 8:50

FILED

ARTICLE I

The name of this corporation shall be: **ALLCOMP SOLUTIONS, INC.**

ARTICLE II

The principal place of business/mailling address of this corporation shall be:
15760 Bull Run Road – Suite 371G – Miami Lakes, Florida 33014

ARTICLE III

The nature of the business to be transacted by this corporation is any activity of business permitted under the Laws of the United States and under the Laws of the State of Florida.

ARTICLE IV

The corporation is authorized to issue a maximum of 500 shares of stock, at a \$1.00 par value.

ARTICLE V

This corporation initial Registered Agent and Registered Office in the State of Florida shall be: **CLAUDIA CABRAL MOREIRA, 15760 BULL RUN ROAD, SUITE 371G, MIAMI LAKES, FL 33014.**

ARTICLE VI

The number of directors may be altered from time to time By-Laws adopted by the stockholders. This corporation shall have no less than one (01) director at the time. Initially, it shall have two (02) directors.

ARTICLE VII

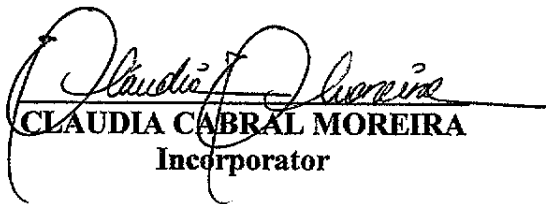
The name and post office addresses of the first Board of Directors members are: **CLAUDIA CABRAL MOREIRA, 15760 BULL RUN ROAD, SUITE 371G, MIAMI LAKES, FL 33014** and **AIUTON AUGUSTO MOREIRA, 15760 BULL RUN ROAD, SUITE 371G, MIAMI LAKES, FL 33014.**

The members of the first Board of Directors shall hold office until the first annual meeting of the stockholders of the corporation.

ARTICLE VIII

The name and post office address of the incorporator executing these Articles of Incorporation is: **CLAUDIA CABRAL MOREIRA, 15760 BULL RUN ROAD, SUITE 371G, MIAMI LAKES, FL 33014.**

The undersigned incorporator, for the purpose of forming a corporation to do business within the State of Florida do make and file these Articles of Incorporation, hereby declaring and certifying the facts herein stated are true.


CLAUDIA CABRAL MOREIRA
Incorporator

STATE OF FLORIDA)

SS.

COUNTY OF DADE)

BEFORE ME, a Notary Public duly authorized to take acknowledgment personally appeared CLAUDIA CABRAL MOREIRA, to me known to be the person described as incorporator in the foregoing Articles of Incorporation and who acknowledged before me that she executed said Articles of Incorporation.

WITNESS my hand and seal this twenty-eighth day of December 2000.

My Commission expires:

4/26/03


Notary Public
State of Florida at Large



Millicent S. Calabro
Commission # CG 829457
Expires Apr. 26, 2003
Bonded Thru
Atlantic Bonding Co., Inc.


**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR
THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON
WHOM PROCESS MAY BE SERVED.**

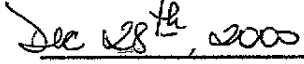
**In pursuance of Chapter 48.091 Florida Statutes, the following is submitted,
in compliance with said act:**

**First, that ALLCOMP SOLUTIONS, INC. desiring to organize under the
Laws of the State of Florida with its principal office, as indicated in the Articles of
Incorporation at the city of Miami, Dade County, State of Florida has named
CLAUDIA CABRAL MOREIRA, 15760 Bull Run Road, Suite 371G, Miami Lakes,
FL 33014, as its agent to accept services of process within this State.**

ACKNOWLEDGMENT

**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.**


CLAUDIA CABRAL MOREIRA
Registered Agent


Date

FILED
01 JAN -3 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA