P0100008928

TRANSMITTAL LETTER

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

| SUBJECT: | NICOLAS VALDEZ SER | RVICE, INC. | ffix) | · | |
|-------------------------|---------------------------------------|---|---|----------------|---------------------------|
| Enclosed is an or | iginal and one(1) copy of the article | s of incorporation and a | 海海海海 | /0101n | 272 80003 ****78.75 |
| ☐ \$70.00 Filing Fee | | □\$122,50 Filing Fee & Certified Copy | \$131.25 Filing Fee, Certified Copy & Certificate | | |
| | | ADDITIONAL CO | PY REQUIRED | | |
| FROM: _ | Nicolas Valdez | | | | |
| _ | Name (Printed | | | Fa | |
| | 404 NW 43rd Street | | TAT | | |
| | Address | 5 | - LLAI | <u></u> | • |
| _ | Miami, Florida 3312 City, State & | | TARY O | FILE JAN 24 | |

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



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 16, 2001

NICOLAS VALDEZ 404 NW 43RD STREET MIAMI, FL 33127

SUBJECT: NICOLAS VALDEZ SERVICE, INC.

Ref. Number: W01000001053

We have received your document for NICOLAS VALDEZ SERVICE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

The registered agent must sign accepting the designation.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6928.

Tim Burch Document Specialist

Letter Number: 001A00002209

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:

NICOLAS VALDEZ SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

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

404 NW 43rd Street Miami, Florida 33127

ARTICLE III

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

ONETHOUSAND (1,000) SHARES AT ONE DOLLAR (\$1.00) PER VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and address of the initial registered agent is:

> Nicolas Valdez 404 NW 43rd Street Miami, Florida 33127

INCORPORATOR(S) ARTICLE V

See instructions for officers/directors

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

Nicolas Valdez 404 NW 43rd Street Miami, Florida 33127

| The unc | dersigned | incorporator | (s) has(have) | executed the | ese Articles (| of Incorporation this |
|----------|-------------|--------------|----------------|--------------|----------------|-----------------------|
| 8th | _ day of . | January, | 2001 | | | n morporation this |
| (An addi | tional arti | cle must be | added if an ei | fective date | is requested. |) |
| | | | | | | |
| | · — | | | Signature | | |
| | | , | | | • | |
| | | | | Signature | ; | |
| • | | | | | | |
| | | • | | Signature | | |

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

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 DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

| 1. The name of the c | corporation is NICOLAS VALUEZ SERV | TCES, INC. | | |
|-------------------------|---|--|----------|----------|
| · | | | | |
| 2. The name and add | lress of the registered agent and office is: | | | |
| | Nicolas Valdez | TAL | . 0 | |
| | (Name) | —————————————————————————————————————— | JA | - |
| | 404 NW 43rd Street, Miami, Flori | ida 33127 | N 24 | <u>ר</u> |
| | (P. O. Box or Mail Drop Box NOT ACC | CEPTABLE) | PE | ָ כ |
| | Miami, Florida 33127 | LORID | -: 33 | |
| · | (CITY/STATE/ZIP) | • > | Ö | |
| to act in this capacity | is registered agent and to accept service of p and in this certificate, I hereby accept the app I further agree to comply with the provision cance of my duties, and I am familiar with an | ointment as registered agent and | agree | |
| / | | | | |