

TRANSMITTAL LETTER  
**PO1000023497**

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

200003796332--7  
-03/02/01--01082--002  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Coin Systems Corp.  
(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: Robert Gonzalez  
Name (Printed or typed)

18730 N.W. 24 Place  
Address

Pembroke Pines FL 33029  
City, State & Zip

(954) 430 7711  
Daytime Telephone number

305- 972-8631 cell.

FILED  
01 MAR - 2 AM 8:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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**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:

*Coin Systems Corp.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*18730 N.W. 24 Place  
Pembroke Pines, FL 33029*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*Sales, Service, Repair + Maintenance of Commercial  
Laundry Equipment + all related products*

ARTICLE IV SHARES

The number of shares of stock is:

*100*

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

*Robert Gonzalez  
18730 N.W. 24 Place  
Pembroke Pines, FL 33029*

ARTICLE VI REGISTERED AGENT

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

*Robert Gonzalez  
18730 N. W. 24 Place  
Pembroke Pines, FL 33029*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Robert Gonzalez  
18730 N.W. 24 Place  
Pembroke Pines FL 33029*

\*\*\*\*\*  
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]*  
\_\_\_\_\_  
Signature/Registered Agent

*2/21/01*  
\_\_\_\_\_  
Date

*[Signature]*  
\_\_\_\_\_  
Signature/Incorporator

*2/21/01*  
\_\_\_\_\_  
Date

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