TRANSMITTAL LETTER

P010003691

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



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SUBJECT:	NICO'S SYSTEM (PROPOSED CORPORA)	RM_CO TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
			000003: -04/06, *****	962700- -5 70101062003 70.00 *****70.00
Enclosed is an origina	l and one(1) copy of the article	es of incorporation and a	. check for :	******
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	of
FROM:	ANTONTO PUTGBO Name (Pr	inted or typed)	.	
	11320 SW 61 TE			
	MIAMI FL 33173	ddress State & Zip	TALLAHASSE	FIL OI APR -6

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

Daytime Telephone number

(305) 273-0670

EFFECTIVE DATE

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (PROFIT)

ARTICLE I NAME

NICO'S SYSTEM CO.

ARTICLE II PRINCIPAL OFFICE
Principal place of business/mailing address is:

11320 SW 61 TE MIAMI FL 33173

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

IMPORT AND EXPORT ELECTRONIC EQUIPMENT

ARTICLE IV SHARES

100 SHARES OF STOCK AT \$1.00 Par Value

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

ANTONIO PUIGBO 11320 SW 61 TE MIAMI FL 33173

ARTICLE VI REGISTERED AGENT
The name and Florida street address of registered agent are:

ANTONIO PUIGBO 11320 SW 61 TE MIAMI FL 33173 TILLED

1 APR -6 AM 9: I

SECRETARY OF STATE

TALL ABASSEF FLORID.

ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator are:

ANTONIO PUIGBO 11320 SW 61 TE **MIAMI FL 33173**

ARTICLE VIII

EFFECTIVE DATE

The effective date of this Corporation shall be APRIL 1, 2001.

Having being named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature /Registered Agent

ANTONIO PUIGBO

Signature /Incorporator

ANTONIO PUIGBO