

OFFICE USE ONLY Document

EXPRESS CORPORATE FILING SERVICE INC.

(Requestor's Name)

1000 PONCE DE LEON BLVD. STE: 101

(Address)

CORAL GABLES, FL 33134 305-444-4994

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. N.C.I. Corporation (Corporation Name) Group (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☒ Pick up time ☒ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
01 SEP 20 PM 3:18
SECRETARY OF STATE
TALLAHASSEE FLORIDA

300004593189--7
-09/17/01--01017--001
****478.75 *****78.75

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 17, 2001

EXPRESS CORPORATE FILING

CORAL GABLES, FL 33134

SUBJECT: N.C.J. CORPORATION
Ref. Number: W01000021486

RECEIVED
01 SEP 20 AM 11:15
DIVISION OF CORPORATION

We have received your document for N.C.J. CORPORATION. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6934.

Loria Poole
Corporate Specialist
New Filings Section

Letter Number: 001A00051878

Loria Poole

ARTICLES OF INCORPORATION

OF

N.C.J. GROUP CORPORATION

FILED
01 SEP 20 PM 3:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I - NAME

The name of this corporation is _____

N.C.J. GROUP CORPORATION

ARTICLE II - DURATION

This corporation shall have perpetual existence, unless sooner dissolved in accordance with the laws of the State of Florida.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any and all business permitted under the laws of the United States and of the State of Florida.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue one hundred (100) shares of no par value common stock, which shall be designated "Common Stock".

ARTICLE V - PREEMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of this corporation of the same kind, class or series as that which he already holds, shall have the right to purchase his pro rata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 6646 COLLINS AVE., MIAMI BEACH, FL 33141

and the name of the initial registered agent of this corporation is NELSON O. PEREZ

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This corporation shall have three director(s) initially. The number of directors may be either increased or diminished from time to time by the bylaws but shall never be less than ONE. The name and address(es) of the initial director(s) of this corporation is (are):

NELSON O. PEREZ

6646 COLLINS AVE
Miami Beach, Fl 33141

JOSE G. PEREZ

6646 COLLINS AVE
Miami Beach, Fl 33141

CARLOS J. PEREZ

6646 COLLINS AVE
Miami Beach, Fl. 33141

ARTICLE VIII - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE IX - INCORPORATOR

The name(s) and address(es) of the incorporators and their respective shares of these articles is (are):

NAME	SHARES	ADDRESS
<u>NELSON O. PEREZ, President</u>	<u>33</u>	<u>6646 COLLINS AVE</u> <u>Miami Beach, Fl 33141</u>
<u>JOSE G. PEREZ, Secretary</u>	<u>33</u>	<u>6646 COLLINS AVE</u> <u>Miami Beach, Fl 33141</u>
<u>CARLOS J. PEREZ, Vice-Pres</u>	<u>33</u>	<u>6646 COLLINS AVE</u> <u>Miami Beach, Fl 33141</u>

IN WITNESS WHEREOF, the undersigned subscriber(s) has (have) executed these articles of incorporation this 16 day of August, 2001.



NELSON O. PEREZ



JOSE G. PEREZ



CARLOS J. PEREZ

Registered Agent

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR
DOMICILE FOR THE SERVICE OF PROCESS WITHIN
THE STATE OF FLORIDA, NAMING AGENT UPON WHOM
SERVICE OF PROCESS MAY BE EFFECTIVE

In compliance with section 607.034 of the Florida Statutes,
the following is submitted: N.C.J. GROUP CORPORATION
desiring to organize or qualify under the laws of the State of
Florida, with its principal place of business in the City of
Miami, County of Dade, State of Florida, has named _____
NELSON O. PEREZ located at _____
6646 COLLINS AVE City of Miami Beach, County of Miami- Dade
State of Florida as its agent to accept service of process within
the State of Florida.

ACKNOWLEDGMENT

Having been named to accept service of process for the above
mentioned corporation, at the place designated in this
Certificate,
I hereby agree to act in this capacity, and further agree to
comply with the provisions of all Statutes relative to the proper
and complete performance of my duties.

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01 SEP 20 PM 3:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA