

TRANSMITTAL LETTER

P01000105739

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

900004660299--2
-10/31/01--01019--010
*****78.75 *****78.75

SUBJECT: Pim Pco Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Jonathan Fallauro
Name (Printed or typed)

8204 Little Beth dr E
Address

Boynton Beach FLA
City, State & Zip

561-414-6418
Daytime Telephone number

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
01 OCT 31 AM 2:25

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

E. CHANDLER NOV 1 2001

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:

Pimped Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5700 Okeechobee Blvd. suite 35
West Palm Beach FLA. 33417

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

retail Sales

ARTICLE IV SHARES

The number of shares of stock is:

100,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Jonathan Fallacaro - President 8204 Little Beth dr E Boynton Beach FLA 33437
Laurel Cruz - Vice President - Same Address

ARTICLE VI REGISTERED AGENT

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

Laurel Cruz - 8204 Little Beth dr E Boynton Beach FLA 33437

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jonathan Fallacaro - 8204 Little Beth dr E Boynton Beach FLA 33437

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/Registered Agent

Signature/Incorporator

Date

Date