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TRANSMITTAL LETTER

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

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SUBJECT: New Impire 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\$87.50Filing FeeFiling Fee,& Certified CopyCertified Copy& Certificate ofStatusADDITIONAL COPY REQUIRED

FROM: Ricky Borges Name (Printed or typed) 102- Lullwater st. APt. B Address Deltona Fl. 32725 City, State & Zip <u>Ayt. \$262004</u> <u>386-848-0047 (cell)</u> Daytime Telephone number

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

bran GAVE ORIZATION BY PHONE TO CURRECT 77 DATE 10 --00 DOC. EXAM

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:

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

102 Lullwater st. Apt. B Deltona f 1. 32725 <u>ARTICLE III PURPOSE</u> The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V ____ INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

REGISTERED AGENT ARTICLE VI

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

ARTICLE VII INCORPORATOR The name and address of the Incorporator is:

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

<u>Licky Brack</u> Signature/Incorporator

<u>9-26-04</u> Date

8-26-04 Date

E LED

04 OCT -5 PH 1:31

TALLAHASSEE, FLORIDA