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# TRANSMITTAL LETTER

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

SUBJECT:	TIECNETS INC				
	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )		
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l 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		
٠			Status		
FROM:	PRO TAX SERVICES INC  Name (Printed or typed)				
- -	937 LONGDALE AVE Address				
	LONGWOOD, FL 32750 City, State & Zip				
	(407) 835-9845				

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

# 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:

**ITECNETS INC** 

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 534 GLADE CT KISSIMMEE, FL 34758

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

# ARTICLE IV SHARES

The number of shares of stock is: 100 - ONE HUNDRED SHARES

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MIGUEL A. RINCON - PRESIDENT

534 GLADE CT

DIANA P. GOMEZ - VICE PRESIDENT

1536 LESLEY DR

KISSIMMEE, FL 34758 TUSCALOOSA, AL 35406

### ARTICLE VI REGISTERED AGENT

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

MIGUEL A. RINCON 534 GLADE CT KISSIMMEE, FL 34758

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DIANA P. GOMEZ 534 GLADE CT

KISSIMMEE, FL 34758

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 5-4-06
Date

ghature/incorporator 5/4/2006

Date