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7 SEP -4 AM 9: 42 ECRETARY OF STATE

## **COVER LETTER**

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

SUBJECT:	ALERMOSOFT			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:	
\$70.00	<b>₹</b> ]\$78.75	\$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
J	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of	
		ADDITIONAL CO	Status	
		ADDITIONAL CC	or i Required	
FROM:	CESAR PENAF	iel		
_	Name (Printed or typed)			
	100/ T-811	40		
	1006 JOSHUA	CREEK C	<u> </u>	
	·	140.055		
	OUTEDO FL	32765		
	OVIEDO, FL City,	State & Zip		
		_		
	<u>(361) 454-</u>	- 5246		
Daytime Telephone number				

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:	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  \[ \[ \left( \text{OOG} \) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	FILED  07 SEP -4 AM 9: 42  SECRETARY OF STATE FALLAHASSEE, FLORIDA
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  CESAR PENAFIEL, 1006 JOSMUA CREEK CT	., OVIEDO, FL 3276:
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is CESAR PENAFIEL 1006 JOSHUA CREEK CT., OVI	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  CESAR PENAFIEL, 1006 JOSHVA CREEK CT., 00	Vi 600, FL 3276
**************************************	
Signature/Registered Agent Da	ite