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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

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

SUBJECT: PINAL I	NC			
Enclosed are an orig	(PROPOSED CORPORA	TE NAME - MUST INCL		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: HE	CTOR PINEDA Name	(Printed or typed)		
	9000 W FLAGLER ST UNIT # 9	Address		
City, State & Zip				
	305-632-3005	elenhone 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:

PINAL INC

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 9000 W FLAGLER ST UNIT # 9

MIAMI, FL 33174

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: STARTED NEW BUSINESS & BANKING PURPOSE.

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES: 1.00 PER VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Hector Pineda

9000 W Flagler St Unit # 9, Miami Fl. 33174

President

Claudia Alzate

9000 W Flagler St Unit # 9, Miami Fl 33174

Vice-President

ARTICLE VI REGISTERED AGENT

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

HECTOR PINEDA 9000 W FLAGLER ST UNIT # 9 MIAMI, FL 33174

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: HECTOR PINEDA 9000 W FLAGLER ST UNIT # 9 MIAMI, FL 33174

Signature/Incorporate

	*****	********
	een named as registered agent to accept service of process for the e, I am familiar with and accept the appointment as registered agent	
*		10/08/2008
	Signature Registered Agent	Date
x		10/08/2008

Date