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COVER LETTER

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

SUBJECT: SISTEMAS AUTOMATICOS INDUSTRIALES INC (PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

STO.00 Filing Fee ✓ \$78.75Filing Fee& Certificate of Status

\$78.75	\$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED

FROM: SIMON DELGADO

Name (Printed or typed)

361 NW 60 CT

Address

MIAMI FL 33126

City, State & Zip

305-5861090

Daytime Telephone number

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

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

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The name of the corporation shall be:

SISTEMAS AUTOMATICOS INDUSTRIALES INC

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 361 NW 60 CT MIAMI FL 33126

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: IMPORT & EXPORT

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): SIMON DELGADO - PRESIDENT 361 NW 60 CT MIAMI FL 33126

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: SIMON DELGADO 361 NW 60 CT MIAMI FL 33126

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: SIMON DELGADO 361 NW 60 CT MIAMI FL 33126

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

02 07 09 Date 02 07 Date

FILED

2009 FEB 1 3 P 12: 5.1 SECRETARY OF STATE

TALLAHASSEE FLORIDA

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Signature/Incorporator