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| PICK-UP WAIT MAIL                       |  |  |  |  |
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| . (Business Entity Name)                |  |  |  |  |
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| Cartified Coning Cartificates of Chat.  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |
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OB MAK I B TH C 33 SECRETARY OF STATE TALLAHASSEE, FLORID



## **COVER LETTER**

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

| SUBJECT:             | POLITEKG                              | -ROUP INC<br>ATE NAME - MUST INCI                   |  |
|----------------------|---------------------------------------|---|--|
|                      | (PROPOSED CORPOR                      | ATE NAME <u>MUST INCI</u>                           | LUDE SUFFIX)   |
| Enclosed are an orig | ginal and one (1) copy of the art     | icles of incorporation and                          | l a check for:   |
| \$70.00 Filing Fee   | Filing Fee<br>& Certificate of Status | S78.75 Filing Fee & Certified Copy  ADDITIONAL CO   | \$87.50 Filing Fee, Certified Copy & Certificate of Status  PPY REQUIRED |
| FROM:                | VALENTIN D<br>Name                    |   |  |
|                      | Lauderhill  954 588  Daytime          | F   333  <br>7, State & Zip  1908  Telephone number | 3  |

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:  | 09 MAR 16 PM 2: 35                         |
| POLITEKGROUP INC   | SECRETARY OF STATE<br>FALLAHASSEE. FLORIDA |
| ARTICLE II PRINCIPAL OFFICE  The principal street address and mailing address, if different is:  |  |
| 2220 NW 44th AVE, Lauderhill,  | FI 33313                                   |
| ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  |  |
| TO ENTER INTO BOWN THEY FAI  | N PROFIT IT SHAKE HOLDER                   |
| 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):   | 3  |
| VALENTIN D. TERMILIEN DR 2220 NW   | 44th AVR, Laudenhill Fl CEO                |
| ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of t  VALENTIN J. TERMILLEN JK 2220 M                                       |  |
| VALTIVITY O. TONIMEN ON 2220 N   | 55513                                      |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is:  | , ,, ,, -/                                 |
| VALENTIN J. TERMILIEN JR 2220  | NW 49th AVE , Lawshill, Fl<br>33313        |
| **********   |  |
| Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and ag | ree to act in this capacity  3/1/109       |
| Signature/Registered Agent   | 03/11/09                                   |
| Signature/Incorporator   | / Pate                                     |