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## **COVER LETTER**

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

SUBJECT: 1@s Enterprises Inc.				
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an original and one (1) copy of the artic	cles of incorporation ar	nd a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL C	OPY REQUIRED		
FROM: Annayahinda Gil Name	(Printed or typed)			
1591 west Fairway Rd	Address			
Pembroke Pines, Fl 330 Gty,	<b>)26</b> State & Zip	,		
(754) 2046146  Daytime To	elephone number			
iasenterprises27@gmail.com E-mail address: (to be used for future annual report notification)				

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		<b>c.</b>	
The name of the	corporation shall be:		
ARTICLEII	PRINCIPAL OFFICE		
	Principal street address	Mailing addre	ess, if different is:
	1591 west Fairway Rd	-	
	Pembroke Pines, Fl.33026		
ADVISOR ET 177	DE IDDASIP		· · · · · · · ·
	PURPOSE  which the corporation is organized is:		
	lawful Business		
	I IAVVICII DOSII ROSS		
			မြှုန် ယ မှု
			THE E
<b>ARTICLE IV</b>			
The number of s	hares of stock is:100		
4 DATE OF 12 17	TARREST OFFICEROS ANDAGE DEFEN	who has	<del></del>
	INTIAL OFFICERS AND/OR DIREC		
Address:	Title: Director Annayahinda Gil 1591 west Fairway Rd	Address:	
Addicss.	Pembroke Pines, Fl.33026	Additess.	
	Fellowerius, 113020	<del></del>	
	<del>, , , , , , , , , , , , , , , , , , , </del>	<del></del>	
Name and	Title:	Name and Title:	
Address:		Address:	
		<del> </del>	
<b>N</b> I	Presi	Name and Tale.	
Name and Address:	l Title:		
Address:			
	REGISTERED AGENT		
	Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name:	Annayahinda Gil		
Address:	1591 West Fairway Rd	<del></del>	
	Pembroke Pines, Fl 33026	<del></del>	
ARTICLE VII	INCORPORATOR		
	address of the Incorporator is:		
Name:	Yertys Pacheco		
Address:	1591 west Fairway Rd		
	Pembroke Pines, Fl 33026		
Hasina hoos w	amed as registered agent to accept service of p	woress for the above stated comonat	ion at the place designated in
	I am familiar with and accept the appointment		
	4 0 //	<b>-19</b>	
	6 B		01/24/2011
——————————————————————————————————————	Required Signature/Registered Ager	——————————————————————————————————————	Date
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I submit this do	ocument and affirm that the facts stated here	in are true. I am aware that the fak	se information submitted in a
document to the	Department of State constitutes a third degree	felony as provided for in s.817.155, i	ES
		· ·	
	Tub.		01/24/2011
	Required Signature/Incorporator		Date
	· / = ,		