## P1000030901

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE

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## **COVER LETTER**

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

## SUBJECT: Element Computers & Electronics Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

| nosed are an original and one (1) copy of the art  | icies of incorporation un                         | d a check for.  |
|--|---|---|
| \$70.00 Filing Fee & Certificate of Status         | \$78.75 Filing Fee & Certified Copy  ADDITIONAL C | \$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED |
| FROM: Isaac Palomino                               | e (Printed or typed)                              |   |
| 1259 Sandestin Way                                 | Address   | <del> </del>  |
| Orlando, FL 32824<br>City,                         | , State & Zip                                     |   |
| 407-766-8260<br>Daytime T                          | Celephone number                                  |   |
| info@myelementpc.com<br>E-mail address: (to be use | ed 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 The name of the co | NAME Element Computers a prporation shall be:     | nd Elec         | tronics Inc     | ;                                      |  |            |              |
|------------------------------|---|-----------------|-----------------|--|--|------------|--------------|
| ARTICLE II                   | PRINCIPAL OFFICE                                  |                 |                 |  |  |            |              |
| Principal street address     |   |                 | Ma              | iling address,                         | if different i                         | s'         |              |
| 4                            | 1327 S US Highway 27 Suite 118                    |                 |                 | destin Way                             |  | <b>~</b> . |              |
|                              | Clermont, FL 34711                                |                 |                 | FL 32824                               |  | =          |              |
|                              |   |                 |                 |  | 5.0                                    | 77         | - the speed  |
|                              |   |                 |                 |  | <b></b>                                | 8          |              |
| ARTICLE III                  |   |                 |                 |  | ASS                                    | $\sim$     | Marian P.    |
|                              | hich the corporation is organized is:             |                 |                 |  |  | ŧ.         | ă .          |
| Computer an                  | d Electronics Repair                              |                 |                 |  | OF STATE<br>SE, FLORID/                | AM 10: 42  |              |
|                              |   |                 |                 |  |  | <u></u>    |              |
|                              |   |                 |                 |  | o X                                    | ب          | -            |
|                              |   |                 |                 |  | 골습                                     | 2          |              |
|                              |   |                 |                 |  | )<br>                                  | • •        |              |
| ARTICLE IV                   | SHARES  |                 |                 |  |  |            |              |
| The number of sha            |   |                 |                 |  |  |            |              |
|                              |   |                 |                 |  |  |            |              |
|                              | INITIAL OFFICERS AND/OR DIRECTO                   |                 |                 |  |  |            |              |
| Name and T                   | itle: <u>Isaac Palomino</u>                       | Name            | e and Title:    |  |  |            |              |
| Address:                     | 4327 S US Highway 27 Suite 118                    | Addr            | ess:            |  | ······································ |            |              |
|                              | Clermont, FL 34711                                | ······ ,        | _               |  |  | ······     | <del></del>  |
|                              |   |                 |                 |  | ~~~                                    |            |              |
| Name and T                   | itle:   | Nam             | e and Title     |  |  |            |              |
| Address:                     |   | Addr            | ess.            |  |  |            |              |
|                              |   |                 |                 |  |  |            |              |
|                              |   |                 | <del></del>     | ······································ |  |            |              |
|                              |   |                 | _               |  |  |            |              |
|                              | itle:   | Name            | e and Title:    |  |  |            |              |
| Address:                     |   | Addr            | ess:            |  |  |            |              |
|                              |   | <u> </u>        |                 |  |  |            | <del> </del> |
|                              | **************************************            |                 | _               |  | ······································ |            |              |
| ARTICLE VI                   | REGISTERED AGENT                                  |                 |                 |  |  |            |              |
|                              | rida street address (P.O. Box NOT acceptable)     | of the rea      | istered agent i | e.                                     |  |            |              |
| Name:                        | Isaac Palomino                                    | -               | isicica agenti  |  |  |            |              |
| Address:                     | 1259 Sandestin Way                                |                 |                 |  |  |            |              |
|                              | Orlando, FL 32824                                 | <del></del>     |                 |  |  |            |              |
|                              |   | <del></del>     |                 |  |  |            |              |
| ARTICLE VII                  | INCORPORATOR                                      |                 |                 |  |  |            |              |
|                              | <u>Iress</u> of the Incorporator is:              |                 |                 |  |  |            |              |
| Name:                        | Isaac Palomino                                    |                 |                 |  |  |            |              |
| Address:                     | 1259 Sandestin Way                                |                 |                 |  |  |            |              |
|                              | Orlando, FL 32824                                 |                 |                 |  |  |            |              |
| Having been name             | ed as registered agent to accept service of proc  | ess for the     | e above stated  | l corporation                          | at the place                           | e design   | nated in     |
| this certificate, I ai       | n familiar with and accept the appointment as r   | egistered (     | agent and agi   | ree to act in thi                      | is capacity                            |            |              |
|                              |   | `               |                 |  |  |            |              |
|                              | Jan John  | <u> </u>        |                 | 02                                     | 02/20/2011                             |            |              |
|                              | Required Signature/Registered Agent               |                 |                 |  | Dat                                    | te         |              |
| I godanske disk de           | mand and affine that the flat are a fit of        |                 |                 |  |  |            | *            |
|                              | ment and affirm that the facts stated herein a    |                 |                 |  | jormation :                            | submút     | iea in a     |
| waluneni io ine Di           | epayiment of State constitutes a third degree fel | vny as pro<br>\ | viueu jor in s. | .01 /.133, F.S.                        |  |            |              |
|                              | lm. Klin  | ノ               |                 |  | 0.100.100.1                            |            |              |
|                              | · /ua   |                 | ····            | Ō                                      | <u>2/20/201</u>                        |            |              |
|                              | Required Signature/Incorporator                   |                 |                 |  | D                                      | ate        |              |