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|---|--|--|--|--|
| (Requestor's Name) | | | | |
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| en l'estre d' | | | | |
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Office Use Only



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September 1

COVER LETTER

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

| SUBJECT: | FIRETONICS (PROPOSED CORPORA | Inc. | |
|----------------------|--|-------------------------------------|--|
| | (PROPOSED CORPORA | TE NAME - <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | d a check for: |
| \$70.00 Filing Fee | ☐ \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| | | ADDITIONAL CO | PY REQUIRED |
| FROM: | | e (Printed or typed) | |
| | 40 nw 87 a | ve apt D2 Address | 1 1 |
| _ | Miami Fl City, | 33172 State & Zip | |
| | 305-417 - 01 Daytime T | Selephone number | |
| | E-mail address; (to be use | hotmoil Co | 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)

| | $\frac{ME}{\text{ation shall be:}} $ $\frac{1}{2}$ $\frac{1}{$ | 2111 | <u> </u> |
|---|--|---|---|
| ARTICLE II PR | INCIPAL OFFICE Principal street address 87 and apt Dall F1 33170 | | Mailing address, if different is: |
| ARTICLE III PU. The purpose for which | RPOSE the corporation is organized is: \(\int\) | ribute | ion, sales |
| | | | |
| | | | |
| The number of shares of ARTICLE V IN | TIAL OFFICERS AND/OR DIRECTOR | | radu o somoano |
| The number of shares of ARTICLE V IN | f stock is: TTIAL OFFICERS AND/OR DIRECTOR | Name and Title | Eddy D. Somoano 40 nw Y7 ave apt Dall Miani Fl 33172 |
| The number of shares of ARTICLE V IN Name and Tit Address | Istock is: ITTAL OFFICERS AND/OR DIRECTOR 1e: Janct CVUZ Prosit 40 nw 87 ave upt D211 | Name and Title Address: Name and Title | 40 nw 77 ave apt D211 Miani F1 33172 |

| Name and Title: | Name and Title: |
|---|--|
| Address | Address: |
| | |
| ARTICLE VI REGISTERED AGENT | |
| The <u>name and Florida street address</u> (P.O. Box NOT acceptable) o | f the registered agent is: |
| Name: Janet Cruz | _ |
| Address: 40 nw 87 aul ap | t Da11 |
| Address: 40 nw 87 aur ap. Mani Fl, 33172 | - |
| ARTICLE VII INCORPORATOR | |
| The <u>name and address</u> of the Incorporator is: | |
| Name: Janet Cruz | _ |
| Address: 40 nw 87 ave ap | FD311 |
| Mianu F1 3317 | |
| Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as reg | |
| Parent Cru4 Required Signature/Registered Agent | 7-10-13 |
| Required Signature/Registered Agent | Date |
| I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felor | true. I am aware that the false information submitted in a sy as provided for in s.817.155, F.S. |
| Hourt Cruf Required Signature/Incorporator | 7-10-13 Date |