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COVER LETTER

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

_{SUBJECT:} CA	T & CAM, INC			
	(PROPOSED COR	RPORATI	E NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of t	the articl	es of incorporation and	d a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	s	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
		L		
FROM: (CARMELO CA			
		Name (Printed or typed)	· · · · · · · · · · · · · · · · · · ·
3	3229 SW 3RD			
		Ad	dress	•
V	/IIAMI, FL 331	35		
		City, St	ate & Zip	
7	'86-4435038			
Daytime Telephone number				

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

E-mail address: (to be used for future annual report notification)

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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

The name of the corporation shall be: CAT & CAM, INC		DIVISION OF CORPORATION
		13 JUL 22 PM 1: 13
ARTICLE II PRINCIPAL OFFICE Principal street address		Mailing address, if different is:
3229 SW 3RE	· ——	
MIAMI, FL 33	135	
ARTICLE III PUR The purpose for which t	POSE he corporation is organized is:	COMPANY OF ALL KIND OF ITEMS, SUCH AS PARCELS, PACKAGES,
ELECTRONIC	C EQUIPMENTS, ETC	
		<u> </u>
ARTICLE IV SHA The number of shares of	IRES 100	
	TIAL OFFICERS AND/OR DIRECTOR	<u>8</u>
Name and Title	CARMELO CARLA	Name and Title:
Address	PRESIDENT	Address:
	3229 SW 3RD STREET	
	MIAMI, FL 33135	
Name and Title		Name and Title:
Address		
/ sucress		
Name and Title:		Name and Title:
Address		Address:

(conti.)

SECRETARY OF STARE DIVISION OF GORPORAFIONS

Name and	Title:	Name and Title:	13 JUL 22 PH 1: 13
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
The name and Flo	orida street address (P.O. Box NOT acceptable) o	f the registered agent is:	
Name:	CARMELO CARLA		
Address:	3229 SW 3RD STREET	-	
	MIAMI, FL 33135		
ARTICLE VII	INCORPORATOR		
The <u>name and ad</u>	<u>dress</u> of the Incorporator is:		
Name:	CARMELO CARLA	_	
Address:	3229 SW 3RD STREET	_	
	MIAMI, FL 33135	_	
	ned as registered agent to accept service of process m familiar with and accept the appointment as re		
	Required Signature/Registered Agent		Date
I submit this doci document to the E	amont and affirm that the facts stated herein are Separtment of State constitutes a third dogree feloi	true. I am aware that the fa ny as provided for in s.817.15	dse information submitted in a 5, F.S.
	effet		07/16/13
	Required Signature/Incorporator		· Date