

P/3000067239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

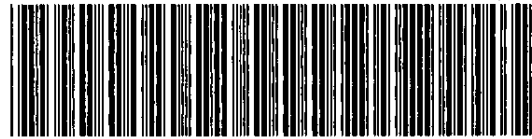
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100250300071

08/12/13--01037--017 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 AUG 12 PM 12:51

144

COVER LETTER

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

SUBJECT: **NORK TECH TRADING CORP**

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and 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 COPY REQUIRED

FROM: **MANUEL D PIELAGO**

Name (Printed or typed)

14230 SW 133 AVE

Address

MIAMI FL 33186

City, State & Zip

786 475-0237

Daytime Telephone number

manuel.d.pielago@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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2018 AUG 12 PM 12:51

ARTICLE I NAME NORK TECH TRADING CORP

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is: _____

14230 SW 133 AVE

MIAMI FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: IMPORT-EXPORT TECHNOLOGY EQUIPMENT AND ACCESSORIES

ARTICLE IV SHARES 100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MANUEL D PIELAGO, P/S Name and Title: CLAUDIA PIELAGOK, VP/T

Address: 14230 SW 133 AVE Address: 1048 SW 5 AVE #B
MIAMI FL 33186 MIAMI, FL 33130

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(cont.)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2013 AUG 12 PM 12:51

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

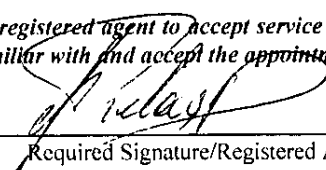
Name: MANUEL D PIELAGO
Address: 14230 SW 133 AVE
MIAMI FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MANUEL D PIELAGO
Address: 14230 SW 133 AVE
MIAMI FL 33186

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

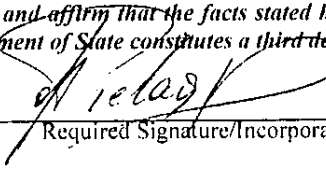


Required Signature/Registered Agent

08/09/2013

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

08/09/2013

Date