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COVER LETTER

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

SUBJECT:	SIW.	TC, IV	10.
	(PRÓPOSED CORPORAT	TE NAME – <u>MUST INCLI</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	T REQUIRED
FROM:	1ichael Bet	Gn cour + (Printed or typed)	
<u> 11</u>	08 Ne Indu	1Stria Bl	vol
	Jensen Bch clay, s	FL 3498 State & Zip	57
	Daytime Te	8936 elephone number	
<u>M</u>	Betancourt @ E-mail address: (to be used	STW Impact for future annual report	f windows. Cornotification)

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)

	INCIPAL OFFICE Principal street add	ress		Ma	iling address,	if different is	s:
	h, FC 349						
DOO (5.	RPOSE the corporation is org	ganized is:	les i	0F	Wind	dow	Γ ,
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ICLE IV SH							
TICLE IV SHOULD SHAPES OF	f stock is:		ors				
number of shares of	f stock is: \\ ITIAL OFFICERS	AND/OR DIRECTO		Title:		· ·	<u> </u>
number of shares of	if stock is: 10 ITIAL OFFICERS Ie: Michael Pleside	AND/OR DIRECTO Betancous nt	Name and Address:	Title:		3 8 0	A SIGN
TICLE V IN	restock is: 10 TIAL OFFICERS Ie: Michael P(esidential) 108 Ne	AND/OR DIRECTO Betancous nt Trdustial	Name and Address:	Title:		9 C - 8	3 VISION OF CO
umber of shares of the shares of the share and Times and Times	restock is: 10 TIAL OFFICERS Ie: Michael P(esidential) 108 Ne	AND/OR DIRECTO Betancous nt	Name and Address:	Title:		OFFC - 8 AM	3 VISION OF CORPONA
Name and Ti	Ital OFFICERS Ital O	AND/OR DIRECTO Betancous nt Trdustial	Name and Address:			OFFIC 18 AM ED	3 VISION OF CORPORATIONS
Name and Ti	itial officers.	AND/OR DIRECTO Betancous nt Tridustrial Bet, FC 34	Name and Address: BVO STY Name and	 Title:		BEC 18 AM 50: 03	10 <u>48</u>
Name and Tit	ITIAL OFFICERS. ILE: Michael Pleside NOP Ne Tensen	AND/OR DIRECTO Betancous Tradustrial Bet. FC 34	Name and Address: Name and Name and Address:	 Title:		GEC 18 AM DE 03	
Name and Tit Address Address	stock is: D STIAL OFFICERS Ie: Michael Pleside 108 Ne Tensen e:	AND/OR DIRECTO Betancous nt Tridustrial Bet, FC 34	Name and Address: VO Name and Address:	Title:		03 03	70.88

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: Michael Betancourt	
Address: 108 Ne Industrial	Blud
Jensen Ach, FL 3495	<u>,</u> =
ARTICLE VII INCORPORATOR	IS DEC 1
The <u>name and address</u> of the Incorporator is:	3 (%) &
Name: Michael Betancons	
Name: Michael Betancous Nog Ne Industria	I Blud S. S.
Jensen, Boh FL 3	<u>14</u> 957
Having been named as registered agent to accept service of proceedings certificate, I am familiar with and accept the appointment as	registered agent and agree to act in this capacity
Required Signature/Registered Agent)
I submit this document and affirm that the facts stated herein a document to the Department of State constitutes a third degree fe	fore true. I am aware that the false information submitted in a fony as provided for in s.817.155, F.S.
Required Signature/Incorporator	