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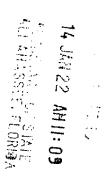
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nai	me)		
(Document Number)				
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Special Instructions to Filing Officer:				





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COVER LETTER

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

SUBJECT: Ir	npact USA Inc.		
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	i 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 o Status
		ADDITIONAL CO	PY REQUIRED
		e (Printed or typed)	
11	28 Tapestry Dri		
C	elebration FL 34	Address 747	
	City,	State & Zip	
71	7.451.6584		
	Daytime T	elephone number	
WI	oa@impactusa.c	com	
	E-mail address: (to be use	d 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)

	Principal street address	I	Mailing address, if differ	ent is:	14 18
128 Tapes				<u> </u>	<u> </u>
elebration	FL 34/4/				
				· (/\	=
RTICLE III PUR	POSE the corporation is organized is: any ar	d all lawf	ful business.	1921 1941	
e purpose for which t	the corporation is organized is:		, ,		
					
·				·	
					
			At		·
RTICLE IV SHA	ARES 1000				
RTICLE IV SHA	ARES stock is: 1000				
e number of shares of	stock is:	S			
e number of shares of	stock is: TOOO FIAL OFFICERS AND/OR DIRECTOR	_			
e number of shares of RTICLE V INIT Name and Title	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President	Name and Title:	· ••••		
e number of shares of	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive	_			
e number of shares of RTICLE V INIT Name and Title	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President	Name and Title:			
e number of shares of RTICLE V INIT Name and Title	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive	Name and Title:			
Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive Celebration FL 34747	Name and Title: Address:			
Name and Title Name and Title	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive Celebration FL 34747 Roberta Abendschein, Treasurer	Name and Title: Address: Name and Title:			
Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive Celebration FL 34747 Roberta Abendschein, Treasurer 1128 Tapestry Drive	Name and Title: Address: Name and Title:			
Name and Title Name and Title	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive Celebration FL 34747 Roberta Abendschein, Treasurer	Name and Title: Address: Name and Title:			
Name and Title Name and Title	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive Celebration FL 34747 Roberta Abendschein, Treasurer 1128 Tapestry Drive	Name and Title: Address: Name and Title:			
Name and Title: Address Address	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive Celebration FL 34747 Roberta Abendschein, Treasurer 1128 Tapestry Drive Celebration FL 34747	Name and Title: Address: Name and Title: Address:			
Name and Title: Address Address	TIAL OFFICERS AND/OR DIRECTOR William Abendschein, President 1128 Tapestry Drive Celebration FL 34747 Roberta Abendschein, Treasurer 1128 Tapestry Drive	Name and Title: Address: Name and Title: Address:			

Name an	d Title:	Name and Title:
Address		Address:
ARTICLE VI The name and FI	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) o William Abendschein	f the registered agent is:
Name:	1128 Tapestry Drive	en Communication
Address:	Celabration FL 34747	- (6) 22
ARTICLE VII	INCORPORATOR	
The name and ad	Idress of the Incorporator is:	%±
Name:	William Abendschein	_
Address:	1128 Tapestry Drive	_
	Celebration FL 34747	-
	ned as registered agent to accept service of process am familiar with and accept the appointment as rej	for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
	White es	1/20/2014
Required Signature/Registered Agent		Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the false information submitted in a sy sprovided for in s.817.155, F.S.
	Whalel	1/20/2014
•	Required Signature/Incorporator	Date