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Florida Department of State

Division of Corporations

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Division of Corporations
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

ETECHNICH, CORP.

Certificate of Status	0
Certified Copy	1
Page Count	03
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DIVISION OF CORPORATIONS

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

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ARTICLE I NAME
The name of the corporation shall be: ETECHNICH, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

10975 S.W. 107 Street
Unit 205
Miami, Florida 33176

Mailing address, if different is:

Same

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: IT Services

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Victor Nicholson, President
Address: 10975 S.W. 107th Street
Unit 105
Miami, Florida 33176

Name and Title:
Address:

Name and Title: Jordan Nicholson, Vice-P
Address: 10975 S.W. 107th Street
Unit 105
Miami, Florida 33176

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

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02/12/2014 13:00 3056339696 CORPUSA PAGE 02/03

H14000083802 2

(cont.)

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: Victor Nicholson

Address: 10976 S.W. 107th Street Unit 105

Miami, Florida 33176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Victor Nicholson

Address: 10975 S.W. 107th Street Unit 105

Miami, Florida 33176

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

_____ 02/10/14

Required Signature/Registered Agent 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.

_____ 02/10/14

Required Signature/Incorporator Date

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