

Division of Corporations

P14000032834

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : BARINAS & ASSOCIATES INC.
Account Number : I20000000082
Phone : (305) 871-0889
Fax Number : (305) 870-9623

SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 APR 11 PM 1:44

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

Email Address: _____

RECEIVED

14 APR 11 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION
NICE, INC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

B 4/14/14

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Help

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: **NICE, INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2500 LANTANA RD APT 1115

LANTANA, FL 33462

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL BUSSINES LAWFULL

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **PRESIDENT**

Name and Title:

Address: **FABIO CASTILLO**

Address:

2500 LANTANA RD APT 1115

LANTANA, FL 33462

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 APR 11 PM 1:44

(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: FABIO CASTILLO
Address: 2500 LANTANA RD APT 1115
LANTANA, FL 33462

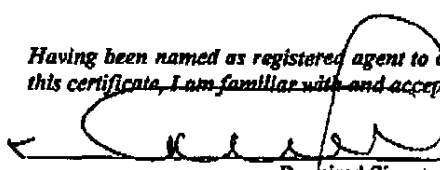
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: FABIO CASTILLO
Address: 2500 LANTANA RD APT 1115
LANTANA, FL 33462

14 APR 11 PM 1:44
FABIO CASTILLO
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS

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

04/04/14

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

04/04/14

Date