## P14000036811

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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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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: ANDEAN ELECTRONIC EQUIPMENT AND SUPPLES, INC.  (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)  Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
S70.00 S78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM: ROBERTO BIANCHI  Name (Printed or typed)  8930 W STATE ROAD 84 STE 156  Address  DAVIE, FL 33324  City, State & Zip				

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

RBIANCHI 630 @ GMAIL. COM E-mail address: (to be used for future annual report notification)

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

The name of the corporation shall be: ANDEAN ELECT	PONIC EQUIPMENT AND SUPPLES, I
ARTICLE II PRINCIPAL OFFICE  Principal street address  8930 W STATE ROAD 84	Mailing address, if different is:
57/2 156 DAVIE, FL 33324	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: AM AM	ND ALL LAWFUL BUSINESS
	SECRE IATA OF STATE UIVISION OF STATE  14 APR 23 PH \$ 40
ARTICLE IV SHARES The number of shares of stock is: 000  ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR  Name and Title: ADAN GONZALEZ	Name and Title: CRISTOBAL SANCHEZ, UP
Address 8930 W STATE ROAD 84  STE 156  DAUTE, FL 33324	
Name and Title: ROBERTO BIANCHI, SEC Address 8930 W 57A7E ROAD 84 STE 156 DAVIE, FL 33324	Address:
Name and Title:Address	Name and Title:

Name and	d Title:Na	ame and Title:	
Address	Ac	ddress:	
ARTICLE VI	REGISTERED AGENT		
The <u>name and Flo</u>	prida street address (P.O. Box NOT acceptable) of the	registered agent is:	
Name:	ROBERTO BIANCHI		
Address:	8930 W STATE ROAD 84	STE 156	
	DAVIE, FL 33324		
ARTICLE VII	INCORPORATOR		
The <u>name and ad</u>	dress of the Incorporator is:		
Name:	KOBERTO BIANCHI		
Address:	8930 W STATIS RUAD 84	4TE 156	
	DAUTE, FL 33324		
Having been nam this certificate, I a	ed as registered agent to accept service of process for m familiar with and accept the appointment as register	the above stated corporation at the place designated in red agent and agree to act in this capacity	
Slet	o Blanchi	21 APR 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.			
Robert	Biarchi	21 APR 14	
	Required Signature/Incorporator	Date	