

AUG/03/2018/FRI 02:26 PM

FAX No.

P. 001

8/3/2018
P180000067269
Division of Corporations
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000226414 3))



H180002264143ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : EXPRESS CORPORATE FILING SERVICE INC.
Account Number : I20000000146
Phone : (305)444-4994
Fax Number : (305)444-4977

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
TECHPAL TECHNOLOGY PARTNERS INC.

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

2018 AUG -3 PM 1:57

REGISTRATION SERVICES

2018 AUG -3 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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: TechPal Technology Partners Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

234 NE 3rd st FL. 33132 Miami Apt 203

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 1000 @ \$ 5.00

ARTICLE V INTIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robinson Villota Franco / President Name and Title: Diego Rodriguez Rodriguez / Director

Address 234 NE 3rd St. 33132 Miami Apt 203 Address: 12791 SW 256 Terrace Homestead 33032

Name and Title: Valentina Rodriguez Franco VP Name and Title: _____

Address 234 NE 3rd St. 33132 Miami Apt 203 Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
2018 AUG - 3 AM 10: 08
SECRETARY OF STATE
TALLAHASSEE, FL

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: Robinson Villota Franco
 Address: 234 NE 3rd St. 33132 Miami Apt 203

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Robinson Villota Franco
 Address: 234 NE 3rd St. 33132 Miami Apt 203

FILED
 2018 AUG - 3 AM 10: 08
 SECRETARY OF STATE
 TALLAHASSEE, FL

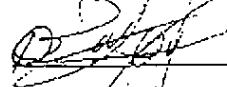
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)


(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

 _____ Date _____
 Required Signature/Registered Agent

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.

 _____ Date _____
 Required Signature/Incorporator