Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 : (305)552-5973 Phone Fax Number : (305)675-5944

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Email	Address:		 	

FLORIDA PROFIT/NON PROFIT CORPORATION PAUL NICOLINI AND ASSOCIATES INC

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

PAUL Nicolini and Associates Inc							
ARTICLE II PRINCIPAL OFFICE:							
The principal street address and mailing address is:							
336 N Babcock ST							
suite 104							
Melbourne, Florida 32935							
ARTICLE III SHARES: The number of shares of stock is:							
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:							
PAUL NICOLINI Director - President							
Sophia Nicolini officer yp							
Sophia Nicolini officer yp Sebastian Nicolini officer Treasurer							
LILIANNA NICOLINI OFFICET - Secretary							
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address (PO Box not acceptable) of the registered agent is:							
5+binternational Investment Services							
336 N Bobcock St Ste 191							
Melbourne, FL 32935							
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:							
PAUL Nicolini							
336 N Babcock St Str 104							
Melbourne, Fl 32935							

Required Signatures:

Having been named as registered agent to accept corporation at the place designated in this certificappointment as registered agent and a	Cate I am familias with
Registered Agent	Date
I submit this document and affirm that the facts stathe false information submitted in a document to the third degree felony as provided for in s.817.155, F.S.	he Department of State constitutes a
V	Date