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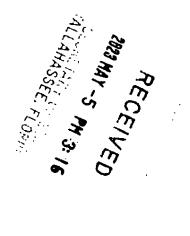
(Reque	estor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Busin	ess Entity Nar	me)		
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(Docu	ment Number)			
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

TECH BIN CORP.		
Please Debit 1200000	000257 For: 70	
Thank you Seth Neel	ev	
1. 1. 1.		
		Art of Inc. File
		UTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Рһыо Сору
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
,		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
Signature		Vehicle Search
		Driving Record
Requested by: SETH	05/04	UCC 1 or 3 File
		UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier
174 Foncer's Riming - Them Issues GA 8/00		•

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: TECH BIN CORP.						
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:					
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED					
FROM: Bared & Associates, P.A.	(Printed or typed)					
201 Alhambra Circle, Suite 501						
Address Coral Gables, FL 33134 City, State & Zip						
305-666-6010 Daytime Te	elephone number					
mimi@baredlaw.com E-mail address: (to be used	for future annual report notification)					

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

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

ARTICLE I	NAME Tech Bin Corp.					
	PRINCIPAL OFFICE					
ARTICLE II	Principal street address		N	Mailing address, i	f different is	s:
	1000 Island Blvd		-	,		
	Unit 1410					
	Aventura, FL 33160	_				<u> </u>
		_				
ARTICLE III	PURPOSE which the corporation is organized is:					
	lawful business.					
ARTICLE IV The number of sh	SHARES Pares of stock is:100					
APTICI F V	INITIAL OFFICERS AND/OR DIRECTO	RS				
Name and	Title: Felix Romano President& Director	 Name 2	and Title:	Daniel Sutto	n Vice Pr	resident_
Address:	201 Alhambra Circle	— Addres	s:	1000 Island	Blvd	
Addicas.	Suite 501			Unit 1410		
	Coral Gables, FL	_		Aventura, FI		
Name and *	Title: Alberto Romano Treasurer	Name a	and Title:			
Address:	201 Alhambra Circle	Addres	s:			
	Suite 501					
	Coral Gables, FL 33134					
Name and 1	Title:	Name :	and Title			
Address:	ittle	Addres	c'			
Address.			· 3 .			
					70,	์ อาการ
	REGISTERED AGENT				5	<u>~</u>
	orida street address (P.O. Box NOT acceptable)		ered ager	nt is:	:	
	Pablo R. Bared, Esq.					
Address:	201 Alhambra Circle, Suite 501	_				1
	Coral Gables, FL 33134				•	
					·	50 iS 34
ARTICLE VII	INCORPORATOR				••	~ '_
	Idress of the Incorporator is:				٠, ب	·.;
Name:	Pablo R. Bared, Esq				~ .	96
Address:	201 Alhambra Circle, Suite 501 Coral Gables, EL 33134	_			- .	
** * 1	ned as registered agent to accept service of proce	ace Com the c	akawa sta	ted cornoration	at the place	designated in
Having been nan	ned as registered agent to accept service of proce um familiar with and accept the appointment as re	as jui inc a	out and o	oree to act in thi	is canakity	
tius certificate, i c	ат затинат мин ана ассері іне арронішені аз те	gisieren ug	em uma a	igree to uct in the		22
					214	1/2
	Required Signature/Registered Agent					le
					- - -	
I submit this doc	rument and affirm that the facts stated herein ar	re true. I ai	m aware	that the false in	formation :	submitted in a
document to the l	Department of State constitutes a third degree felo	ny as provid	ded for in	i s.817.155, F.S.	6	1100
		•			シル	kl ルグー
					[-]	1 "
	Required Signature/Incorporator			_	-iD	ate