P9600001857



\$5 B

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

SUBJECT: _	2 Com	KOTERPRISES No.	
		(Proposed corporate name)	

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$______.

FROM:			
	alor LARCARIA	2 P	ITI
	Name (printed or typed)	一四年 75	C
	Ano HERIDAN TREET - H-21		
	Address	— P	
	Hollywood FZ, 33000		
	City, State, & Zip	 -	
	(35) 925- 3095		
	Telephone Number	_	

Dmc 96

100001675911 -01/02/96--01115--014 ****122.50 ****122.50

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

ARTICLES OF INCORPORATION FOR STATE OF STATE OF STATE FILED

ZCOM KNTERPRISES INC

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: ZCOM ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 SHARES NO VAR PALUE

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and address of the initial registered agent is:

ARTICLE V INCORPORATORIS)

The name(s) and street address(es) of the Incorporator(s) to these Articles of Incorporation Is(are): JOE ZAECARIA, DRIE INCACE, PRESIDENT, HAVO SHERWAN FREET SECTY-TREAS, & DIRECTOR HH-71 HOLLIF WOOD TZ. 330 20
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this
IN day of DECOURER, 1995.
Doe Jaccova
Signature
Signature
Signature

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pui sig sta	rsuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the under- ined corporation, organized under the laws of the state of Florida, submits the following itement in designating the registered office/registered agent, in the state of Florida.
	ALCO MANAGEMENT OF THE PARTY OF
1.	The name of the corporation is: ZCOM FNTARPRINES INC.
-	
2. .	The name and address of the registered agent and office is:
	LOE ZACCARIA
	140 SHERIDAN STEET-11-21
	(P.O.) Box NOT acceptable) HULLYNOOD, F2. 330 20
	(Cyty/State/Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE

DATE

REGISTERED AGENT FILING FEE: \$35.00