TRANSMITTAL LETTER Ont of State Ont of State

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

SUBJECT:	TOP	CONNECTION	INC.		
	(Proposed corporate name - must include suffix)				

	sed is an origin	nal and one (1) o	opy of the articles o	of incorporation a	nd a check
for:	₹70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	filing Fee, Certified Copy & Certificate y Required	

FROM: XIMENA SAINTE - MARIE

Name (printed or typed)

7915 S. W. 86 ST. # 725

Address

MIAMI FLORIDA 33143

City, State & Zip

(305) 274 5797 (305) 235 8119

Daytime Telephone number

5/14/16

10

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

ARTICLES OF INCORPORATION

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:

TOP CONNECTION INC.

ARTICLE II PRINCIPAL OFFICE

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

7915 S.W. 86 ST. #725 MIAMI FI. 33143

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

XIMENA SAINTE-MARIE 7915 S.W. 86 ST. # 725 MIAMI FI. 33143

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

XIMENA SAINTE - MARIE - PRESIDENT 7915 S.W. 86 ST. # 725 NIAMI FIORIDA 33143

Sylvia Rementeria - Secretary

14700 S.W. 95 AVE.

Mian'i Florida 33176

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6⁷⁶ day of <u>MA7</u>, 19<u>96</u>.

(An additional article must be added if an effective date is requested.)

Signature
Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED C FFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FI ORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE 1 AWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

١.	The name of the corporation is:	TOP	CONNECTI DA	INC	•
2.	The name and address of the regist	ered agent a	nd office is:		195
	XIMENA		e-Marie	<u>.</u>	
	7915 S.W.		. #725 Box <u>NOT</u> acceptable)		HO IO
	MIANI F	IORIDA (CITY/Si	·		7.**

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.

Leveus fif fil MAY 6 / 96 (DATE)