TRANSMITTAL LETTER

P97000048520

FILED CHELARY OF STATE CORPORATE.

97 MAY 30" AM 9: 06

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

or to to core	Millenium Computer Services, Inc. (Proposed corporate name - must include suffix)			
SUBJECT:				
Enclosed is an	original and one	e(1) copy of the article	s of incorporation and a c	heck for :
□ \$70 Filing I	.00	☐ \$73.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate
			ADDITIONAL COPY REQUIRED	
FI	ROM:	Arturo Batista Name (Printed or typed)		
1219 NW 192nd Way Address				
Pembroke Pines, FL, 33029 City, State & Zip				
305-594-0598 Daytime Telephone number				

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



ARTICLES OF INCORPORATION

97 MAY 30 AM 9: 06

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

ARTICLE I NAME

The name of the corporation shall be.

Millenium Computer Services, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1219 NW 192nd Way, Pembroke Pines, FL, 33029

ARTICLE III SHARES

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

1000 par \$0.001

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Arturo Batista 1219 NW 192nd Way Pembroke Pines, FL, 33029

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Arturo Batista 1219 NW 192nd Way Pembroke Pines, F1, 33029

Signature/Incorporator

5/27/97

Date

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

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/Registered Agent

5/27/97

Date