TRANSMITTAL LETTER 10072883

97 AUG 21 AM 10:41

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

SUBJECT:	BELCHIOR INC.	
	(Proposed corporate name - must include suffix)	_

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee

2.

\$78.75

Filing Fee & Certificate □\$122.50

Filing Fee

& Certified Copy

□ \$131 25

Filing Fee,

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: WILSON BELCHIOR FERNANDES
Name (Printed or typed)

6070 NW. 64 AV. BLDG #6-AP. 304

TAMARAC FLORIDA 33319

City, State & Zip

7245508

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

ARTICLES OF INCORPORATION

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:

BELCHIOR INC.

ARTICLE II PRINCIPAL OFFICE

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

6070 NW 64 Ave BLD # 6 Apt # 304 Tamarac Florida 7C 33319

ARTICLE III SHARES

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

100 (One hundred) shares, having a par value per share of \$1,00 (one dollar).

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Gerson Migliacio. 1221 N.17 AV. Hollywood, FL.33020

ARTICLE V INCORPORATOR

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

WILSON BELCHIOR FERNANDES

6070 NW 64 Ave BLD # 6 APT # 304

Tamarac Flopida 33319

SignatureIncorporator

08-18-1997 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