P980000990986

(asi	ka a		1000	<u> </u>
Requestor's Name				
4330	NW	79	Ave	#2D
Address				
Maia	mì	71	33	166
City	/State/Zip)	Phor	ie #

400902657414--1 -10/07/98--01033--018 ******70.00 ******70.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.	(Corporation Name)	JERKUA (DOCUM	N Con puter	c,In(り.
2	(Corporation Name)	(Досш	ment #)	98 TAL	
3	(Corporation Name)	(Doctu	ment #)	8 OCT 2	-13
4	(Corporation Name)	(Docu	ment #)	<u>644_</u> _5 ⊡2	
☐ Walk in	Pick up time		Certified Copy	4 2: 33 SIATE FLORIDA	
Mail out	☐ Will wait	Photocopy	Certificate of Status	, .	
WETT TVCS	AMENT	MIENES			

Ivian out	— Will Wait — Includepy
NEWFILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Directe
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTR. QUALIFIC	
Foreign	
Limited Partnersh	и́р
Reinstatement	
Trademark	
Other	

W98-23017

Examiner's Initials TH-1026 98



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 9, 1998

CASILDA AFONSO 4330 NW 79TH AVE, #2-D MIAMI, FL 33166

SUBJECT: INVERKUAN, INC. Ref. Number: W98000023017

We have received your document for INVERKUAN, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6926.

Letter Number: 298A00050277

Tracy Augsburger Document Specialist

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:

INVERKUAN, COMPUIER, INC.

ARTICLE II PRINCIPAL OFFICE

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

4330 N.W. 79 Ave. #2D Miami, Fl. 33166

ARTICLE III SHARES

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

One Thousand (1000) shares at One Dollar (1.00) per value.

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

Casilda Afonso 4330 N.W. 79 Ave. #2D Miami, Fl. 33166

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):

Jose R. Guevara 4330 N.W. 79 Ave. #2D Miami, Fl. 33166

DIRECTOR & PRESIDENT.

Casilda Afonso ' 4330 N.W. 79 Ave. Miami, Fl. 33166

DIRECTOR & VICE-PRESIDENT.

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 OFFICE

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

7 s s

1. The name of the corporation is:	<u>INVERKUAN COMPUTER, I</u>	FILED BOCT 26 PH 2: 3 CHETAN OF SIAN LAHASSIE, FLOW
2. The name and address of the regi	stered agent and office is:	OF G
Cas	ilda Afonso (NAME)	· · · · · · · · · · · · · · · · · · ·
<u>4330 N</u> (P.O. B	.W. 79 Ave. #2D ox or Mail Drop Box <u>NOT</u> ACCEPTABLE	<u> </u>
Miami,	F1. 33166 (City/State/Zip)	·
Having been named as registered corporation at the place designated agent and agree to act in this capacity relating to the proper and complete pobligations of my position as registe	in this certificate, I hereby accepity. I further agree to comply with the companient of my duties, and I do red agent.	t the appointment as registered th the provisions of all statutes