TRANSMITTAL LETTER

Department of State

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

Enclosed is an original	and one(1) copy of the article	s of incorporation and a	check for :	DIVISION OF
Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	SECRE HE CORPORATION 3: 05
FROM: Benjamin Rodriguez Name (Printed or typed) 3300 NE 192 ST, #202 Address				· 12
	Aventure City,	State & Zip	33180	
	305-	935-585 elephone number	<u>_</u> 9	

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:
ALOTTA Pressure, Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
3300 NE 192 ST, #202 2 35
Aventura, FL 33180
ARTICLE III SHARES S Q
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 Florida street address of the initial registered agent are: Benjamin Lodriguez 3300 NE 192 ST, #202 Arentwo, Fl 33181 The name and address of the incorporator to these Articles of Incorporation are: Benjamin Lodriguez Todd Thayer 3300 NE 192 ST, #202 3300 NE 192 ST, #202 Arentwo, Fl 33180 Arentwo, Fl 33180 1119/99 Sighature/Incorporator 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

Date