Parismittal letter 153/5

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

SUBJECT:	All tECHNOLOE (Proposed corpor	SY SOPPI ate name - must include suff 20	7 INC 10002962902- -08/18/9901042 *****78.75 ******	
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:				
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	· I	va. 19
FROM:	16850 S. Glas	inted or typed)	2X SECTION OF SHAPE O	
	N. MIAMI BEAC	H.F133162 State & Zip	ORDA S	
N	(305) 6326 Daytime Te	AUTHO CCRRE DATE	8-24-99 -24-99	

ARTICLES OF INCORI GRATION
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 parms of the corporation shall be:
Business Corporation Act, hereby adopts the following Articles of Incorporation.
ARTICLE I NAME
The name of the corporation shall be:
The name of the corporation shall be: All Technology Supply, Incoming
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
16850 S. 61ADES Dr. #2K, N. MIANI BEACH, F1 33162
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
(000)
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
1, 98 HIGGER SILVA 16850 S. GLADES Dr. #24
N. PiANI BEACH FIBRIL?
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:
•
Juis Alfauel Salva 16850 S. Glades On. #2K
M. MiANI BEACH F1 33162
08/16/99
Signature/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

Signature/Registered Agent

Date