

TRANSMITTAL LETTER

P99000110640

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

SUBJECT: Office Equipment .Com, Inc.
(Proposed corporate name - must include suffix)

700003074747--4
-12/20/99--01061--006
*****78.75 *****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
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Javier Diaz
Name (Printed or typed)
4825 Lorraine Way
Address
Orlando, FL 32812
City, State & Zip
(407) 382-9406
Daytime Telephone number

RECEIVED
TALLAHASSEE, FLORIDA

99 DEC 20 AM 8:42

FILED

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

T. Burch DEC 27 1999

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:

Office Equipment .Com, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4825 Lorraine Way
Orlando, FL 32812

ARTICLE III SHARES

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

100 shares of stock at \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

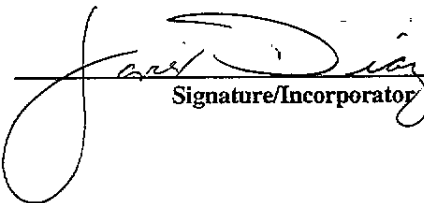
The name and Florida street address of the initial registered agent are:

Javier Diaz
4825 Lorraine Way
Orlando FL 32812

ARTICLE V INCORPORATOR

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

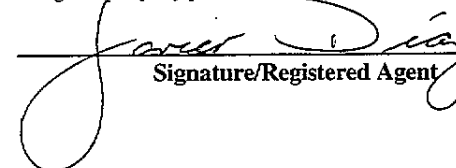
Javier Diaz
4825 Lorraine Way
Orlando FL 32812


Signature/Incorporator

12/16/99
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

12/16/99
Date

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99 DEC 20 AM 8:42
STATE OF FLORIDA
TALLAHASSEE, FLORIDA