

P00000015292

TRANSMITTAL LETTER

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

800003110658--8  
-01/26/00--01021--005  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Solution Benefits, 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

☐ \$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: William W. Dunbar  
Name (Printed or typed)

5147 Kernwood Ct  
Address

Palm Harbor, FL 34685  
City, State & Zip

727-771-2670  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 FEB 14 AM 10:59

FILED

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

T BROWN FEB 14 2000



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

February 1, 2000

WILLIAM W. DUNBAR  
5147 KERNWOOD CT  
PALM HARBOR, FL 34685

SUBJECT: BENEFIT SOLUTIONS, INC.  
Ref. Number: W00000002773

We have received your document for BENEFIT SOLUTIONS, INC. and your check(s) totaling \$87.50. 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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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) 487-6933.

Teresa Brown  
Corporate Specialist

Letter Number: 200A00004632

## 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:

*Solution Benefits, Inc.*

### ARTICLE II      PRINCIPAL OFFICE

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

1520 Seagull Dr. #305  
Palm Harbor, FL 34685

### ARTICLE III      SHARES

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

100

### ARTICLE IV      INITIAL REGISTERED AGENT AND STREET ADDRESS

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

William W. Dunbar, 5147 Kernwood Court, Palm Harbor, FL 34685

### ARTICLE V INCORPORATOR

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

William W. Dunbar, 5147 Kernwood Court, Palm Harbor, FL 34685

*William W. Dunbar*  
Signature/Incorporator

*1-24-2000*  
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.

*William W. Dunbar*  
Signature/Registered Agent

*1-24-2000*  
Date

FILED  
00 FEB 14 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA