D9/990000386

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

100003583031--3 -01/26/01--01167--016 *****87.50 ******87.58

| SUBJECT: | Supportd Corporation | | |
|-------------------------|--|--|--|
| | (PROPOSED CORPORA | ATE NAME – <u>MUST INCL</u> I | UDE SUFFIX) |
| Enclosed is an orig | ginal and one(1) copy of the artic | les of incorporation and a | a check for : |
| □ \$70.00 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 |
| FRO: | M: <u>Daniel Evenson</u> Name(1 | Printed or typed) | |
| | 662 Glades Circle | #114 | SET |

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

Address

City, State & Zip

Daytime Telephone number

Altamonte Springs, FL

(407) 786 - 3574

199

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I

The name of the corporation shall be:

Supportd Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

662 Glades Circle #114 Altamonte Springs FL 32714

ARTICLE III PURPOS<u>E</u>

The purpose for which the corporation is organized is:

Information Technology Service and Sales

ARTICLE IV

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS (DIRECTORS (optional)

The name(s) and address(es):

Daniel Evenson (President, Secretary, Treasurer, Director) 662 Glades Circle #114 Altamonte Springs, FL

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Daniel Evenson 662 Glades Circle #114 32714 Altamonte Springs, FL

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Daniel Evenson 662 Glades Circle #114 Altamonte Springs, FL 32714

*************************** Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this

certificate, I am familian with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

OJ MAS MOS