P96000102141

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: 800002031888--9 -12/18/96--01015--015 ****131.25 ****131.25 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : \$70.00 **□ \$78.75** \$131.25 **□\$**122.50 Filing Fee Filing Fœ Filing Fee, Filing Fæ & Certificate **Certified Copy** & Certified Copy & Certificate ADDITIONAL COPY REQUIRED Sergey Matyushin FROM: 1825 Ponce de Leon Blud. Suite #329 CORal Gables, fl 33134 City, State & Zip Daytime Telephone number

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

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ne 12/18/96

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Sof Tware Direct, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1825 PONCE de Leon Sqite #329) COMAL Gables, FL 33134

ARTICLE III SHARES

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

500 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Scrgey Matyushin
18090 COLLINS ave #141
SUNNY ISLES, FL 33160

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Serger Matrushin, 18090 collins are. Apt. #141 Sunny Islas, Fl 33160

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this						
16 .	lay of	December	. 19 96			

(An additional article must be added if an effective date is requested.)

e Mitin	
Signature	
Signature	
Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is_	Software Direct, INC.
2.	The name and address of the reg	istered agent and office is:
	· · · · · · · · · · · · · · · · · · ·	Serger Matrushin 25 8
	(P. O.	(NAME) 19090 COLLINS QVC. APT 141 Box of Mail Drop Box NOT ACCEPTABLE)
		4 AA SUMNY ISLES, FL, 33130 & ST

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) 12/16/96