

P99000023724  
Transmittal Letter

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

800002800318--6  
-03/10/99--01018--004  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: PS Consultants 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       \$78.75       \$122.50       \$131.25

FROM: Satya Sai Varma Nidadavolu  
Name (printed or typed)  
15404 Plantation Oaks  
Address  
Tampa, FL 33647  
City, State, & Zip  
(813) 971-9819  
Daytime Telephone Number

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 MAR 10 PM 3:11

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

3-15  
WS

# Articles of Incorporation

Of

## PS Consultants Inc.

*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:

PS Consultants Inc.

### ARTICLE II PRINCIPAL OFFICE

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

15404 Plantation Oaks Dr., #13  
Tampa, FL 33647

### ARTICLE III SHARES

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

100 Shares

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is

Satya Sai Varma Nidadavolu  
15404 Plantation Oaks Dr., #13  
Tampa, FL 33647

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**ARTICLE V INCORPORATOR(S)**

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

Satya Sai Varma Nidadavolu  
15404 Plantation Oaks Dr., #13  
Tampa, FL 33647

Prema Varma  
15404 Plantation Oaks Dr., #13  
Tampa, FL 33647

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

8<sup>th</sup> Day of March, 1999.

NSSvarma

Signature

Prema Varma

Signature

Signature

Articles of Incorporation  
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT / REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, 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: PS Consultants Inc.

2. The name and address of the registered agent and office is:

Satya Sai Varma Nidadavolu  
15404 Plantation Oaks Dr., #13  
Tampa, FL 33647

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*Having been named as the 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.*

N S S V A R M A  
Signature