# AMMON 15423

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

500002088065--9 -02/14/97--01065--006 \*\*\*\*122.50 \*\*\*\*\*122.50

SUBJECT: Axiom Solutions, Inc.

I enclose an original and  $\underline{1}$  copy(ies) of the Articles of Incorporation for the above corporation and a check in the amount of  $\frac{122.50}{122.50}$ .

signed:	tola Polini	
From:	•	
Christopher Re	binson	<u></u>
12887 Lower Address	River Blud	
<u>Orlando</u>	<b>F</b> L State	<b>32919</b> Zip
407 381-179 Telephone Number		

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SECRETARY OF STATE
TAIL AHASSEF FLORIDA

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#### ARTICLES OF INCORPORATION

OF

# Axiom Solutions, Inc.

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SECRETARY OF STATE
TALLAHASSEE FLORID

#### ARTICLE I NAME

The name of the corporation shall be: Axiom Solutions Tho

# ARTICLE II PRINCIPAL OFFICE

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

12887 Lower River Blvd

Orlando, FL 32828

# ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 2000.

# ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Christopher Robinson

12887 Lower River Blvd

Orlando, FL 32828

# ARTICLE V INCORPORATOR

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

Christopher H. Robinson

12887 Lower River Blvd

Orlando, FL 32828

The undersigned has executed these Articles of Incorporation this 13th day of February 1997.

Christopher H. Robinson, Incorporator

#### CERTIFICATE OF DESIGNATION

#### 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:

Axiom Solutions, Inc.

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

Christopher Robinson

12887 Lower River Blvd

Orlando, FL 32828

Signature: Chatales Rollins

Title: Incorporator

Date: 02-13-47

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SECRETARY OF STATE
TALL AHASSEE FLORID

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: Chatyle Rolum