

F99000005418

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: AZTEK SOLUTIONS, INC.
(Name of corporation - must include suffix)

900003004839--2

-10/04/99-01135-004

*****87.50 *****87.50

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation
to transact business in Florida.

Please return all correspondence concerning this matter to the following:

HAROLD ALARCON
(Name of Person)

AZTEK SOLUTIONS, INC.
(Firm/Company)

2118 Bridgeview Circle
(Address)

Orlando, FL 32824
(City/State/Zip)

Name	<u>CP</u>
Availability	<u>CP</u>
Document	<u>CP</u>
Examiner	<u>CP</u>
Updater	<u>CP</u>
Verifier	<u>CP</u>
Acknowledgment	<u>CP</u>
W. P. Verifier	<u>CP</u>

Should you need to call someone concerning this matter, please call:

JENNIFER SCHMIDT at (407) 631-5691
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
99 OCT 22 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 6, 1999

HAROLD ALARCON
2118 BRIDGEVIEW CIRCLE
ORLANDO, FL 32824

SUBJECT: AZTEK SOLUTIONS, INC.
Ref. Number: W99000023052

We have received your document for AZTEK 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return 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) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 599A00048466

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. AZTEK SOLUTIONS, INCORPORATED
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. MICHIGAN
(State or country under the law of which it is incorporated)

3. 38-3489699
(FEI number, if applicable)

4. September 20, 1999
(Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. September 27, 1999
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2118 Bridgeview Circle
Orlando, FL 32824
(Current mailing address)

8. Staffing Agency
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Harold Alarcon
~~AZTEK SOLUTIONS, INC.~~

Office Address: 2118 Bridgeview Cir
Orlando, FL, Florida, 32824
(Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Harold Alarcon
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: HAROLD ALARCON

Address: 8131 SW 34th ST
DAVIE, FL 33324

Vice Chairman: JENNIFER SCHMIDT

Address: 768 HARRIER CRT
VIERA, FL 32955

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: HAROLD ALARCON

Address: 8131 SW 34th St.
DAVIE, FL 33324

Vice President: JENNIFER SCHMIDT

Address: 768 HARRIER COURT
VIERA, FL 32955

Secretary: _____

Address: _____

Treasurer: _____

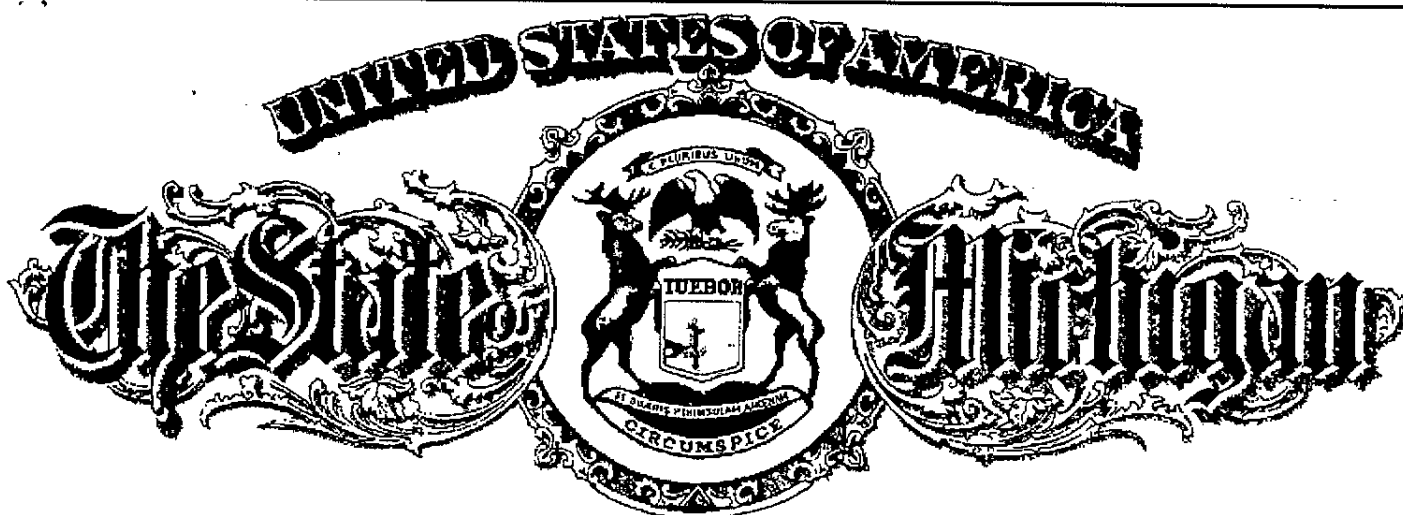
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. J. Schmidt
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. JENNIFER J SCHMIDT VICE CHAIRMAN / VP
(Typed or printed name and capacity of person signing application)

FILED
99 OCT 22 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Michigan Department of Consumer and Industry Services

Lansing, Michigan

This is to Certify That

AZTEK SOLUTIONS, INC.

was validly incorporated on September 20, 1999, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this State.

This certificate is issued to attest to the fact that the corporation is in good standing in this office as of this date and is duly authorized to transact business or conduct affairs in Michigan and for no other purpose. It is in the usual form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department, in the City of Lansing, this 22nd day of September, 1999.

Julie Croll

, Director

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Corporation, Securities and Land Development Bureau