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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 OO JAH - 7 PM 1: 02 |
SECHELARY OF STATE
TALLARY SSEE, FLORIDA

SUBJECT:

EBASE SOLUTIONS, INC.

(Proposed corporate name - must include suffix)

700003031357---8

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee

\$78.75

Filing Fee & Certificate of

Status

\$78.75

Filing Fee

& Certified Copy

\$87.50

Filing Fee,

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Orlando Arrom

Name (Printed or typed)

10556 N.W. 26th St. - Suite 203

Address

Miami, FL 33172

City, State & Zip

(305) 592-0663

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

Daytime Telephone number

ARTICLES OF INCORPORATION

OF

00 JAN -7 PM 1:02 SEGRETARIE DE STATE TALLAHASSEE, ELORIDA

EBASE SOLUTIONS, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE I

The name of this corporation shall be:

EBASE SOLUTIONS, INC.

ARTICLE II

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) / Transact any and all lawful business.
- (2) Said corporation shall further have powers:

 To have perpetual succession by its corporate name;

WKITCHE IA

The aggregate number of shares which the corporation shall have authority to issue is the total sum of five hundred (500) shares, having an individual par value of one dollar (\$ 1.00)

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial principal office and the name of the initial Resident Agent of this corporation shall be:

8350 N.W. 52nd Terrace - Suite 205
Miami, FL 33166

INITIAL RESIDENT AGENT

Mohammed A. Mughal

ARTICLE VI

The initial Board of Directors shall consist of a total of one (1) person, and the name and address of the person who is to serve as an initial director is:

Mohammed A. Mughal 8350 N.W. 52nd Terrace - Suite 205 Miami, FL 33166

The name and address of the 21 these Articles of Incorporation is:

> Mohammed A. Mughal 8350 N.W. 52nd Terrace - Suite 205 Miami, FL 33166

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 20 day , 19<u>99</u> .

STATE OF FLORIDA SS. COUNTY OF DADE

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally known to me and Mohammed A. Mughal appeared known by me to be the person(s) who executed the foregoing Articles of Incorporation, and he (they) acknowledge before me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this 20th day of December.

AUBLIC, STATE OF FLORIDA

AT LARGE

My Commission Expires:



CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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: EBASE SOLUTIONS, INC.
	<u>⊼s</u> 9
	The name and address of the registered agent and office is:
2.	Mohammed A. Mughal
	(NAME)
•	8350 N.W. 52nd Terrace - Suite 205
	(P.O. BOX <u>NOT</u> ACCEPTABLE)
	Miami, FL 33166
	(CITY/STATE/ZIP)

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

DATE