TRANSMITTAL LETTER

Post October 1987 Department of State Division of Corporations TRANSMITTAL LETTER TO COLUMN 1987 Department of State Division of Corporations

P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: <u>B. A. S.</u>	Technol (Proposed corpor	ate name - must include suff	<i>O/OS</i> ix)	 .
3000032467430 -05/10/0001049017 ******87.50 *****87.50 Enclosed is an original and one(1) copy of the articles of incorporation and a check for :				
□ \$70.00 □ \$78.75 Filing Fee & Certifica	te of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status Y REQUIRED	
FROM: B. A. S. Technology Solutions Name (Printed orbitped)				
1112 Richview Road Address				
Tallat	City, St	lorida 32301 tate & Zip	EORETARY OF LLAHASSEE, FI	APPROVED
	570 - 010 18 Daytime Tele	Sephone number	—— STATI	2

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

500

Will Wait

ARTICLES OF INCORPORATION

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

<u>ARTICLE</u> I NAME The name of the corporation shall be: B. A. S. Technology Solutions, Con

ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 112 Richview Road Tallahassee, FL 32301

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

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Amanda Jarmon Richview Road

Tallahassee, FL

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Amanda Jarmen

Richvaw Road

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

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