POOOOOO63534

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 900003305959-12 -06/27/00-01032-008 ******78.75 ******79.75

SUBJECT:	Solutions	Enter.	tanment	INC	
	(Proposed corporate name – must include suffix)				

Enclosed is an original and one(1) copy of the article	s of incorporation and	a check for:
	対\$78.75 Filing Fee & Certified Copy	□\$87.50 Filing Fee, Certified Copy & Certificate of Status
	L ADDITIONAL COP	Y REQUIRED - !

FROM:	Christopher J. Lavin				
	Name (Printed or typed)				
	2200 Maidland Canton Dinner Cults 210	,			
	2300 Maitland Center Pkwy Suite 317	7			
	Address	1717 200 1 00			
	Maitland, Florida 32751	per			
	City, State & Zip	Di Di			
	(407)838-1009	A STATE OF THE STA			
	Daytime Telephone number	38 38 38 38 38 38 38 38 38 38 38 38 38 3			

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

g/6/29

ARTICLES OF INCORPORATION

Signature/Registered Agent

	orporator, for the purpose of forneby adopts the following Articles	ning a corporation under the Florida E s of Incorporation.	and the same
ARTICLE I	NAME		OO JUN 27 PK 3: 3 SECKLINGSEELFLORI
	poration shall be: Solutions Er	itertainment, Inc.	हैं हैं
ARTICLE II	PRINCIPAL OFFICE		
	of business and mailing address o		Dr. S
	Ť	~	d Center Pkwy
		N.C. ia	Suite 317
ARTICLE III	SHARES	Mait	land, FI 32751
		authorized to have outstanding at any	y time is: 1000
	*	.	'
ARTICLE IV	INITIAL REGISTERE	D AGENT AND STREET ADD	<u>RESS</u>
The name and Florid	a street address of the initial regi	stered agent are: Christopher Lav	
		2300 Maitland (Suite 317	Center Pkwy
		Maitland, Fl 32	751
ARTICLE V	INCORPORATOR		
The name and address	ess of the incorporator to these A		•
		Christopher Lav 2300 Maitland	
		Suite 317	Contor I kwy
	// .	Maitland, FJ 32	751
/ (5		06/01/00	
Signature/Ir	ncorporator	Date	
	-		
	لل المام المن المناطقة المام المناطقة المام المناطقة المام المام	- 1 : 6 CC+i J-+- i 1)	
()	an additional article must be add	ed if an effective date is requested.)	
		service of process for the above state t the appointment as registered agent	
in this capacity. I fur	rther agree to comply with provis	sions of all statutes relating to the pro accept the obligations of my position	per and complete