

P000000089156

TRANSMITTAL LETTER

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

000003385950--3  
-09/18/00--01072--011  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: LEADING EDGE DESIGNS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 of Status  
ADDITIONAL COPY REQUIRED

FROM: JOEL BLISS  
Name (Printed or typed)

1307 W. CONCORD ST.  
Address

ORLANDO, FL 32805  
City, State & Zip

941-587-4692  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 SEP 18 PM 3:18

FILED

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

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

LEADING EDGE DESIGNS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

1307 W. CONCORD ST.  
ORLANDO, FL 32805

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

JOEL BLISS  
1307 W. CONCORD ST.  
ORLANDO, FL 32805

THOMAS DROBNEY  
1307 W. CONCORD ST.  
ORLANDO, FL 32805

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JOEL BLISS  
1307 W. CONCORD ST.  
ORLANDO, FL 32805


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOEL BLISS  
1307 W. CONCORD ST.  
ORLANDO, FL 32805

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

9/12/00  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

9/12/00  
\_\_\_\_\_  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 SEP 18 PM 3:18

FILED