

TRANSMITTAL LETTER

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

700903412557—5

Subject	ST Solutions, I	nc.
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Enclosed is an original and one (2) copy of the articles of incorporation and a check for

 S122.50 Siling Fee,

& Certified Copy

& Certificate

& Certificate

(ADDT'L COPY REQ'D)

(ADDT'L COPY REQ'D)

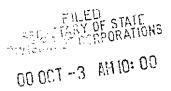
FROM:	Ana Beatriz Higgins	_
	30141 Agoura Road, Suite 205	
	Agoura Hills, California 91301	

ON OCT -3 KIND: 00

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

\$ 10/5/00

ARTICLES OF INCORPORATION OF ST Solutions, Inc.



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

ARTICLE I NAME

The name of the Corporation shall be: ST Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2711 Allen Rd Suite H20 Tallahassee, Florida 32312

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1,500 shares at \$1.00 par value per share.

<u>ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

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

Tom Lloyd 2711 Allen Rd Suite H20 Tallahassee, Florida 32312

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Ana Beatriz Higgins 30141 Agoura Road, Suite 205 Agoura Hills, California 91301

Ana Beatriz Higgins, Incorporator

September 22nd, 2000.

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.

Tom Lloyd, Registered Agent

Date