TRANSMITTAL LETTER

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

5\$5 DATA KOCESSING. 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

\$122.50

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: 5 & 5 DATA PROCESSING, INC.

Name (Printed or typed)

918 SAMUS CIVICLE, APT 106 Address

DEERFIELD BEACH, FL 33432 City, State & Zip

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

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.

ARTICLE I NAME

The name of the corporation shall be:

5 & S DATA PROCESSING, INC.

ARTICLE II PRINCIPAL OFFICE

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

918 Spring Circle, Apr 106 DEERFIELD BEACH, FL 33941 CRETARY OF STATE LANGASSEE, FLORING

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Frank Sweedy 918 Spring Circle, Apt 106 DEERFIELD BEACH, FL 33441

ARTICLE V INCORPORATOR

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

Fraux Sweedy 918 Sprib Circle, Apr 100

DEERSTELD BEACH, FL 33441

Signature/Incorporator

Date

(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 provitions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of the position as registered agent

Signature/Registered Agent

Date