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

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	港港市本作(Q a	} -	

SUBJECT:		TVCOGY SOLUTE E NAME - MUST INCLUDE:			
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	Filing Fee F & Certified Copy C	\$87.50 illing Fee, certified Copy c Certificate of tatus REQUIRED		
FROM: MICHAEL O. A. AINA Name (Printed or typed) PART ALTAMONTE DRIVE Address Address					
AUTAMONTE SPRINGS FL32701 City, State & Zip 407 265 9322 Daytime Telephone number					

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

PH 10/10/00

ARNICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME The name of the corporation shall be:	nn nct 16 AM 10: 21
XPIDITE TECHNOLOGY SOLUTIONS IN C	TALLAHASSEE, FLORIDA
The principal place of business/mailing address is:	
971 EAST ALTAMONTE DRIVE ALTAMONTE SPRINGS, FL 3270 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	7
COMPUTER CONSULTATION X LEARN	NG CENTER
ARTICLE IV SHARES The number of shares of stock is:	one de la companya d La companya de la co
2 MILLION	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): MICHAEL O. A. AND	
ATTAMENTE DE ALTAMENTE DE ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: MICHAEL O. A. AINA	R 232707
971 E. ALTAMONTO PR ALTAMONTO SPRINGS FC	3270/
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: M(CHAEL O. A. ANNA 971 E. ALTAMONTE DR.	
AUTAMONTE SPRINGS FO	32707
**************************************	**************************************
Signature/Registered Agent	10-3-00
Signature/Registered Agent	Date
MonAno	10-3-00 Date
Signature/Incorporator	Date