POOON ON TRANSMITTALLETTER 6

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

700003441617--5 --10/27/00--01003--010 *****87.50 *****87.50

SUBJECT: SAJ INFORMATION SYSTEMS, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an origin	al and one(1) copy of the articles	of incorporation and a cl	heck for:	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	SEKHAR MAN Name (Pr	DAPATI inted or typed)		
	600 VICTORY G	ARDEN DY # ddress	<u>M105</u>	
	TALLA HASS	SEE FL 32 State & Zip	301 SECTIVE	130 GG
	(850) & [6-2845	INSSEE,	i 26 F

A RTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be:
SAI INFORMATION SYSTEMS, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 600 VICTORY GARDEN DY #MIOS, TALLAHASSEE, FL-32301
ARTICLE III PURPOSE The purpose for which the corporation is organized is: SOFTWARE CONSULTING & DEVELOPMENT
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es): The name(s) and address(es):
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: SEKHAR MANDAPATI
Tallehane FL-32301 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: SEVHAR MANDARATI
600 Victory Garden DV #M/05 Tallelassee FL-3230 ***********************************
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
Nolla Day Signature/Registered Agent Date
Signature/Incorporator Jol 2 6/00 Date