# PO100000768

FLEXERA INTERNATIONAL

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

SUBJECT:

900003513659--5 -12/27700--01009--022 \*\*\*\*\*87.50 \*\*\*\*\*87.50

(Proposed corporate name - must include suffix)			
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enclosed is an origin  \$70.00  Filing Fee	al and one(1) copy of the article  \$78.75  Filing Fee  & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	LOSEPH A SEVERI	A Printed or typed)	···········
	461 SHELL COVE D	Address	SECRE
	Melbourne FL City	329 + D , State & Zip	DEC 26 PH
	(321) 757-0792	Falanhona numbar	TATE TO THE TABLE

## 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:

FLEXERA INTERNATIONAL INC.

# ARTICLE II PRINCIPAL OFFICE

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

461 SHELL COVE DR

WELBOURNE FL 32940

### ARTICLE III SHARES

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

1000

# ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

LOSEPH A SEVERA

461 SHELL COVE DR

MELBOURNE FL 32940

### ARTICLE V INCORPORATOR

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

LOSEPH A SEVERA

THE SHELL COVE DR

MELBOURNE FL 32940

DEC. VY 2000

(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 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

Signature/Registered Agent

Signature/Incorporator

Date