034361 **Transmittal Letter** Department of State **Division of Corporations** P.O. Box 6327 300004011333 Tallahassee, FL 32314 04/16/01--01097 ****78.75 *****78.75 SUBJECT: S.D.S. Consulting Inc. (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: q\$131.25 q\$70.00 q\$78.75 q\$122.50 Filing fee Filing fee, Filing Fee Filing Fee Certified Copy, & Certificate & Certified Copy & Certificate Additional Copy Required 0 Sean Watson FROM: ŝ Name (printed or typed) 4048 NW 90th Ave. ណ Address Sunrise, FL 33351 City, State & Zip 954-288-4295 Daytime Telephone Number Note: Please provide the original and one copy of the articles.

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Articles of Incorporation

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation shall be: S.D.S. Consulting Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 4048 NW 90th Ave. Sunrise, FL 33351

ARTICLE III: SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:, **100000**

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Sean Watson 4048 NW 90th Ave. Sunrise,FL 33351

ARTICLE V: INCORPORATOR(S)

See instructions for officers/directors. The name(s) and street addresses of the incorporator(s) to these Articles of Incorporation is (are):

> Sean Watson 4048 NW 90th Ave. Sunrise, FL 33351

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 12 th day of April, 2001

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

Notarization is not required.

Note: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

Filing Fee \$70.00

Certificate of Designation of Registered Agent/Registered Office

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FILED

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

S.D.S. Consulting Inc.

2. The name and address of the registered agent and office is:

Sean Watson (Name) 4048 NW 90th Ave. (P.O. Box or Mail Drop Box NOT Acceptable) Sunrise, FL 33351 (City/State/Zip)

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)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314