## P0/000045040

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

SUBJECT: 100	pic Pool:	Solutions te name - must include suffi	INC.	
,	(Proposed corpora		. nnnn4092	-01112016_
Enclosed is an original and	i one(1) copy of the article	s of incorporation and a c	check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	P.O. Box	FEBUIN nted or typed)	CRETARY OF ST	11 APR 30 PH 1:
-	Onlando	dress  FC - 2286  ate & Zip	27- <u>7</u> 6/2	2

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

ish May 4 200

## ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: TROPIC SOLUTIONS, INC..

The principal place of business and mailing address of this corporation shall be: 5220 Kings Court, Orlando, 查2.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 Shares of Common Stock, No Par Walue

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent is: Rafael Alvarado 5220 Kings Court, Orlando, FL. 32810

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 statues 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

32810

4/24/01 Date