

# P010000079098

TRANSMITTAL LETTER

FILED

01 AUG -7 AM 9:07

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

000004523200--6  
-08/07/01--01081--010  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: SOFTVISION TECHNOLOGIES Inc.,  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: NIDAMARTI S.K. MOHAN  
Name (Printed or typed)

1889, S. KIRKMAN Rd # 627  
Address

ORLANDO, FL - 32811  
City, State & Zip

407- 292 - 5037  
Daytime Telephone number

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

G. BLALOCK AUG 13 2001

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

SOFTVISION TECHNOLOGIES INC.,

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1889, S. KIRKMAN Rd, #627,  
ORLANDO, FL-32811.

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

1. PROVIDE MOST CREATIVE SERVICES AND SOFTWARE SOLUTIONS IN THE MOST TIME AND COST EFFICIENT MANNER POSSIBLE; 2. CREATING GEOGRAPHY INDEPENDENT VIRTUAL TEAMS [SOFTWARE CONSULTANT(S)] AND PROVIDING CUTTING EDGE SOLUTIONS ACROSS THE GLOBE; DEVELOPING MARKET CENTRIC SOFTWARE SOLUTIONS THAT

## ARTICLE IV SHARES DELIVER TRUE COMPETITIVE ADVANTAGE.

The number of shares of stock is: 50

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

NIDANARTI S.K. MOHAN

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

NIDANARTI S.K. MOHAN  
1889, S. KIRKMAN Rd, #627,  
ORLANDO, FL-32811.

## ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

NIDANARTI S.K. MOHAN,  
1889, S. KIRKMAN Rd,  
#627, ORLANDO, FL-32811.

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

08.01.2001  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

08.01.2001  
\_\_\_\_\_  
Date