# POIDDOGO 96030

Department of State Division of Corporations P. 0. Box 6327 Tallahassee. FL 32314

> 100004617401--6.7 -10/01/01--01023--017 \*\*\*\*\*78.75 \*\*\*\*\*\*78.75

#### CREATIVE PHASES CORP.

SUBJECT: \_\_\_\_

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

enclosed is an original and one( I) copy of the articles of incorporation and a check for :

☐ \$70.00 Filling Fee

□ \$78.7*5* 

Filling Fee

& Certificate of Status

\$78.75 Filing Fee

& Certified Copy

□ \$87.50 Filing Fee

Filing Fee.
Certified Copy
& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:	CARLOS D. KREFFT	O1
FROM: _	Name (Printed or typed)	
	7022 N.W. 169 <sup>TH</sup> STREET	
	Address MIAMI LAKES, FLORIDA 33015	FOR PH L
-	City, State & Zip	
	305-824-0461	
_	Daytime telephone number	

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

### ARTICLES OF INCORPORATION

The undersigned incorporation(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:

**CREATIVE PHASES CORP.** 



## ARTICLE II PRINCIPAL OFFICE

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

7022 N.W. 169<sup>TH</sup> STREET
MIAMI LAKES, FLORIDA 33015

#### ARTICLE III PURPOSE

The purpose for which this corporation is been organized is:

SOF#WARE DEVELOPMENT SALES

#### ARTICLE IV SHARES

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

#### 100 SHARES AT \$1.00 PAR VALUE

#### ARTICLE V INITIAL OFFICERS / DIRECTORS

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

CARLOS D. KREFFT 7022 N.W. 169<sup>TH</sup> STREET MIAMI LAKES, FLORIDA 33015

#### ARTICLE VI REGISTERED AGENT

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

CARLOS D. KREFFT 7022 N.W. 169<sup>TH</sup> STREET MIAMI LAKES, FLORIDA 33015

## ARTICLE VII INCORPORATOR

The name and street address of the incorporator is:

# CARLOS D. KREFFT 7022 N.W. 169<sup>TH</sup> STREET MIAMI LAKES, FLORIDA 33015

**************************************	********************
Having been named as registered agent to accept service of place designated in this certificate, I am familiar with and a agree to act in this capacity	process for the above stated corporation at the ccept the appointment as registered agent and
AH .	9/24/01
Signature/Registered Agent	Date (9/2/01
Signature/incorporator	Date!

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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.

The name of the corporation is:

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l. The name and a	ddress of the registered agent and office is:	010C
C	CARLOS D. KREFFT	TARY TARY
7	(NAME) 7022 N.W. 169 <sup>TH</sup> STREET	E F ST
(P.O. BOX C	R MAIL DROP OFF BOX NOT ACCEPTABLE)	ATE RID
ī	NIAMI LAKES, FLORIDA 33015	
	(CITY/STATE/ZIP)	£ .

CREATIVE PHASES CORP.

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.

9/26/2001 (\$IGNATURE) (DATE)