POODOOS State TRANSMITTAL LETTER OF State

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

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SUBJECT:	Sequence Management, Inc. (PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)			
	(PROPOSED CORPOR	ATE NAME - MUST INCL	UDE SUFFIX)	Towns seems who
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation an	d a check for:	
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	**2578.75** Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of	
		ADDITIONAL CO	Status PY REQUIRED	
FROM:	MicHAEL LIE Name		-	meseric t
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NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I The name of the corporation shall be: Sequence Management, Inc. PRINCIPLE OFFICE ARTICLE II The principle place of business/mailing address is: Mailing Address: P.O. Box 2881 Physical Address: 7 Prism Place Lake City, FL 32056 Lake City, FL 32025 **PURPOSE** ARTICLE III The purpose for which the corporation is organized is: Any lawful activity including: project management, construction services, metal fabrication ARTICLE IV The number of shares of stock is: 100 shares INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Michael Lienemann, President P. O. Box 2881 Lake City, FL 32056 <u>REGISTERED AGENT</u> The name and Florida street address of the registered agent is: Michael Lienemann 7 Prism Place Lake City, FL 32025 *INCORPORATOR* ARTICLE VII The name and address of the incorporator is: Michael Lienemann P. O. Box 2881 Lake City, FL 32056 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. Registered Agent Signature/Incorporator