TRANSMITTAL LETTER

P02000050245

Department of State Division of Corporations		
P. O. Box 6327		
Tallahassee, FL 32314		
		3 000054311938 -05/02/0201059015 *****78.75 *****78.75
SUBJECT: SYNTHAXE INC. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:		
□ \$70.00	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: OLMANN BILLY Name (Printed or typed) Name (Printed or typed)		
FROM: OLMANN BILLY Name (Printed or typed) 798 Cotton Bay Dr W Address Worth Pollm Posch El 33406		
west Faim Beach Fi. 33400		
City, State & Zip		

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

Daytime Telephone number

ARTICLES OF INCORPORATION

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

ARTICLE I

The name of the corporation shall be:

SYNTHAXE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

798 Cotton Bay Dr. W. Apt.1402 WEST PALM BEACH, FL. 33406

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

COMPUTER CONSULTANT

ARTICLE IV SHARES

The number of shares of stock is:

FIVE HUNDRED OF ONES

ARTICLE V INITIAL OFFICERS /DIREC

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

OLMANN BILLY

798 Cotton Bay Dr. W. Apt. 1402, WEST PALM BEACH, FL.

100%

REGISTERED AGENT ARTICLE VI

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

OLMANN BILLY

798 Cotton Bay Dr. West Apt. 1402

West Palm Beach

INCORPORATOR ARTICLE_VII

The name and address of the Incorporator is:

Dr. W. Apt. 1402

West Palm Beach 33406

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

2tth, 2002.

Date

NAME

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