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### CORPORATION(S) NAME

W.P. Verifier

CR2E031 (R8-85)

OFFICE	SYStems SC	JUHONS INC
		RECEI
( ) Profit ( ) NonProfit	( ) Amendment	Toll Free:
( ) Foreign	( ) Dissolution	
( ) Limited Partnership ( ) Reinstatement	( ) Annual Report ( ) Reservation	( ) Mark  ( ) Other ( ) Change of Registered Agent  ( ) Certificate Under Seal  ( ) After 4:30 ( ) Mail Out
Certified Copy	( } Photo Copies	( ) Certificate Under Seal
( Call When Ready ( ) Will V	( ) Call If Problem ( Pick Up	( ) After 4:30 ( ) Mail Out SSEC 4 SSEC 4 SSEC 8 SECRETARY 8 SSEC 8 SECRETARY 8 SSEC 8
Neme Aveilability Document Examiner		V-8 PHIZ: 26 TARY OF STATE ASSEE FILORIDA
Updater  Verifier  Acknowledgment		Sur S

# ARTICLES OF INCORPORATION

Oī				
OFFICE SYSTEMS SolutionS INC.				
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.				
The name of the corporation is:  OFFICE SYSTEMS Solutions Eve				
ARTICLE II - DURATION				
This corporation shall exist perpetually unless dissolved according to Florida law.				
ARTICLE III - PURPOSE				
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.				
The corporation is authorized to issue Five Huvard shares (500) of ONE  Dollar(s) (\$				
ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT				
The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:				
NAME (BISEIA SANCHEZ				
ADDRESS 621 SW 113 AUE				
CITY PEMBRORE PINES FLORIDA ZIP 33025				
The principal office, if known, or the mailing address of the corporation is:				
NAME OFFICE SYSTEMS SOLUTIONS INC.				
ADDRESS 15841 PINES Blud,				
CITY PEMBRIKE PINES FLORIDA TIP 3217				

## ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have(		
NAME ANA SANCHEZ		
ADDRESS 15841 PINES Blud		
CITY PEMBROKE PINES	STATE F2.	ZIP <i>330</i> 27
NAME MARIA TABORDA		
ADDRESS 5464 NE 15T	TERR	
CITY FT. LAWDERDALE	STATE FL	zır <i>3</i> 3334
NAME		
ADDRESS		
CITY	STATE	ZIP
A PTICI E	VI I - INCORPORATORS	
The names and addresses of the incorporators signing		follows:
NAME ANA SANCHEZ	1 0	
ADDRESS 15841 PINES BI	upl -	
CITY VEMBROKE BIFINES	STATE FL	ZIP <u>33427</u>
NAME MARIA TABORDA		
ADDRESS 5464 NE /3 7	ERR	33334
CITY FT LAWDERDAIE	STATE F	ZIP <del>J.Z.Y</del>
NAME		
ADDRESS		
CITY	STATE	ZIP
IN WITNESS WHEREOF, the undersigned subscribday of MAY 2002	er(s) have executed these Articles of Inc	corporation this 674
•	Oana Son	(Seal)
	Marie plan	(Seal)
		(Seal)

Daily Business Review - 07/94

## CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

OFFICE SYSTEMS SOLUTIONS INC.

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 612 GISWII3 AVE

PEMBROKE PINES FL. 33025

has named 6 ISE A SANCHEZ

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

#### **ACKNOWLEDGEMENT**

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the coordinate tions of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)