## TRANSMITTAL LETTER Department of State Division of Corporations TRANSMITTAL LETTER

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

SUBJECT:	COMPUTER DUDES			-
Englaced are an evic		TE NAME - MUST INCLUI	SECF	general Polici General
\$70.00 Filing Fee	ginal and one (1) copy of the article \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: Toph Byans  Name (Printed or typed)  6555 Told North North North  Address				
	(850) 681 -75		00005597 -05/22/020 *****78.75	4054 31041001 *****78.75

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

85/2

In compliance with Chapter 607 and/or Chapter 621, 1	F.S. (Profit)		
ARTICLE I NAME			
	TER DUDES SERVICE GROUP, INC		
ARTICLE II PRINCIPAL OFFICE			
The principal place of business/mailing address is:	<b>~</b> -		
	439 WEST GAINES STREET		
	The area of the same		
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	939 WEST GAINES STREET TALLAHASSEE, FL 32304		
ARTICLE IV SHARES	TASE SS		
The number of shares of stock is: 10,000	ECRETARY 22 SECRETARY ALLAHASSE		
	ASS H		
ARTICLE V INITIAL OFFICERS/DIRECTO			
The name(s), address(es) and title(s):	AS TOPCIONAL OF STATE		
ARTICLE VI REGISTERED AGENT			
The name and Florida street address of the registered	d agent is:		
	Toon Byans		
	6555 TOM ROBERTS ROAD		
ARTICLE VII INCORPORATOR	TALLAHASSEF, FL 32301		
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
GSS TOM ROBERTS READ	·		
TALLAHASSEF, FL 32301 ************************************	************		
Having been named as registered agent to accept service of proceertificate, I am familiar with and accept the appointment as registered.	ess for the above stated cornoration at the place designated in this		
Nell WB.			
Signature/Registered Agent	Date		

Noch W Bu
Signature/Incorporator