

TRANSMITTAL LETTER

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

300006407523--4  
-07/15/02--01085--016  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: ZEN Property Solutions, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: STEVEN J. LYTAI  
Name (Printed or typed)

2187 54TH TRAIL South  
Address

West Palm Beach, Florida 33415  
City, State & Zip

(561) 434-7718  
Daytime Telephone number

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 JUL 15 PM 2:10

FILED

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

ZEN PROPERTY SOLUTIONS, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2187 54<sup>TH</sup> TRAIL South  
West Palm Beach, Fla. 33415

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

the buying + selling + management of Real Estate

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000.

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

**ARTICLE VI REGISTERED AGENT**

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

STEVEN LYTAI  
2187 54<sup>TH</sup> TRAIL South  
West Palm Beach, Florida 33415

**ARTICLE VII INCORPORATOR**

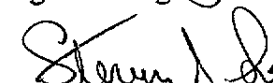
The name and address of the Incorporator is:

STEVEN LYTAI  
2187 54<sup>TH</sup> TRAIL South  
West Palm Beach, Florida 33415

\*\*\*\*\*  
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

7/10/02  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

7/10/02  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA