TRANSMITTAL LETTER Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 800(****87.50 ****87.50 SUBJECT: けいいし NC ST INCLUDE SUFFIX) **ORPORATE NAME -**Enclosed are an original and one (1) copy of the articles of incorporation and a check for: □ \$70.00 **\$78.75** \$78.75 \$\$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED KENIN SARKER Name (Printed or typed) FROM: <u>5ESTEY ST. APT2</u> Address Π 1.6 EM 9:39 AUGUSTINE F City, State & Zip 32084 904-827-0955 Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

ST. AUGUSTINE COMPUTING INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: <u>Place of Business</u>: <u>mailing</u> address : 5 Estey 5t. #2 St. Augustine FL 32034 <u>ARTICLE III</u> <u>PURPOSE</u> The purpose for which the corporation is organized is: <u>Place of Business/mailing</u> address is: <u>Mailing</u> address is: <u>Place of Business/mailing</u> address is: <u>Place of Business is:</u> <u>Place of Business is:</u> <u>Place of Business is:</u> <u>Place of </u>

Computer training and public internet access

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Kovin Barker 5Estey HZ 5t. Augustine, FL 32084

ARTICLE VI REGISTERED AGENT

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

Kevin Barker 5 Estey #Z 51. Augustine FL 32084 <u>ARTICLE VII INCORPORATOR</u>

The name and address of the Incorporator is:

Kevin Borker 5Estey #2 SE. Augustine FL 32

Kevin DBarker Kevin DBarker anature/Registered Agent gnature/Incorporator

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