# P0300026722

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# TRANSMITTAL LETTER

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

SUBJECT:		tions, INC.	
	(PROPOSED CORPOR	TTE NAME – <u>MUST INCLU</u> DE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and a check for:	
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 \$87.50 Filing Fee Filing Fee, & Certified Copy & Certificate Status  ADDITIONAL COPY REQUIRED	of
FROM:	Todd		
	17844	Haynie Lane Address	
	Jupiter	, FL 33478 , State & Zip	-
		307-8020 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)

#### ARTICLE I NAME

The name of the corporation shall be:

LT Solutions, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

17844 Haynie Lane Jupiter, FL 33478

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To perform information services and supply software products.

# ARTICLE IV SHARES

The number of shares of stock is:

1000 with a par value of \$0.01

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Lori Skeen, President 17844 Haynie Lane Jupiter, FL 33478

Todd Guild, Vice President 17844 Haynie Lane Jupiter, FL 33478

Theodore Guild, Director 17844 Haynie Lane Jupiter, FL 33478

# ARTICLE VI REGISTERED AGENT

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

Todd Guild 17844 Haynie Lane Jupiter, FL 33478

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Todd Guild 17844 Haynie Lane Jupiter, FL 33478

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

| 3 | 6 3 |
| Signature/Registered Agent | Date

Signature/Incorporator Date