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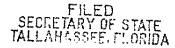
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TRANSMITTAL LETTER

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

	(I ROLOSED COM ORA)	5 14146 - <u>11054 111050</u>	DD 9 OFFITA)	
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:	
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL COPY REQUIRED		
FROM:		n C. Abyo (Printed or typed)	rms I	
4720 Salisbury Rd Ste. 118				
	Address			
JACKSONVILLE, FL 32256 City, State & Zip 866-932-2474 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) 03 MAY -6 PM 1:28

ARTICLE I NAME

The name of the corporation shall be: Abrams Software, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 4720 Salisbury Rd., Ste 118, Jacksonville, FL 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Professional IT Services, Software and/or Hardware

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): Nancy L. Abrams, 1830 W. Cobblestone Ln., St. Augustine, FL 32092, President

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is: Nancy L. Abrams, 1830 West Cobblestone Lane, St. Augustine, Fl 32092

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Jonathon C. Abrams, 1830 West Cobblestone Lane, St. Augustine, FL 32092

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

Date

Signature/Incorporator

Date