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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

	(TROTOSED COL	CIOCATE	NAME - MOST ATOM	SEE STATES
Enclosed are an ori	ginal and one (1) copy of	the articles	s of incorporation and	l a check for:
S70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Statu	s	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	DAVID PAC	Name (Prin	nted or typed)	
	104, RIVE	RBE	ND BLVS)
	Language	City, Stat	L 327	79
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NOTE: Please provide the original and one copy of the articles.

**	FILED	
ARTICLES OF INCORPORATION		
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	03 MAY -8 A	4 8: 32
ARTICLE I NAME The name of the corporation shall be: PHOENIX SOLUTIONS, FNC.	SECRETARY O TALLAHASSEE.	F STATE FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 104, RIVERBEND BLVD LONGWOOD FL, 32779 ARTICLE III PURPOSE	×	
The purpose for which the corporation is organized is: AN E-BUSINESS SOLUTIONS	ComPAISY	
ARTICLE IV SHARES The number of shares of stock is:		
ARTICLE V INITIAL OFFICERS/DIRECTORS (option The name(s), address(es) and title(s): DAVID PRCKLICED 104, RIVERBEND BLVD LONGWOOD FL. 32779 PRESIDENT	<u>nalj</u>	
The name and Florida street address of the registered agent is: DAVID PROKUCED	المحافظ إراحا السياس	
104, RIVERBEND BLVD LONGWOOD FL. 32779		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: DAVID PACKWADD 104, RIVERBEND BLUB LONGWAD FL. 32779		
***********************	*******	*****
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent an Signature/Registered Agent		
Signature/Incorporator	Dat	e