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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)205-0381

From:  
Account Name : JOHN L. TOMLINSON  
Account Number : I19980000017  
Phone : (954)771-9336  
Fax Number : (954)771-9488

**FLORIDA PROFIT CORPORATION OR P.A.**

International  
Orion Services Inc., Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

FILED  
03 MAY 19 PM 3:19  
STATE  
TALLAHASSEE, FLORIDA

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**Articles of Incorporation**ARTICLE I - NAME

The name of this corporation is Orion Services International, Inc.

ARTICLE II - PRINCIPAL OFFICE

The mailing and street address of the initial principal office of this corporation is 5181 NE 18<sup>th</sup> Avenue #4, Fort Lauderdale, FL 33334

ARTICLE III - DURATION

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

ARTICLE IV - PURPOSE

This corporation is organized for the purpose of transacting any or all-lawful business.

ARTICLE V - CAPITAL STOCK

This corporation is authorized to issue 1,000 shares of \$1.00 par value common stock which shall be designated "Common Shares".

ARTICLE VI - PRE-EMPTIVE RIGHTS

Every shareholder, upon the sale for cash of any new stock of the corporation shall have the right to purchase his prorata share thereof ( as nearly as may be done without issuance of fractional shares) at a price at which it is offered to others.

ARTICLE VII - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation is 500 NW 62<sup>nd</sup> Street, Ste 455 Fort Lauderdale, FL 33309 and the name of the initial registered agent of this corporation at this address is John L. Tomlinson.

Prepared by John L. Tomlinson, CPA, PA  
500 NW 62<sup>nd</sup> Street, Ste 455  
Fort Lauderdale, FL 33309

phone 954-771-9336

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ARTICLE VIII - INITIAL BOARD OF DIRECTORS

This corporation shall have 1 director constituting the initial Board of Directors. The number of Directors may be either increased or decreased from time to time by the by-laws. The names and addresses of the of the initial Board of Directors of this corporation are

NameAddress

Michal Dvorak

5181 NE 18<sup>th</sup> Avenue, #4  
Fort Lauderdale, FL 33334ARTICLE IX - INCORPORATORS

The name and address of each person signing these Articles is:

NameAddress

Michal Dvorak

5181 NE 18<sup>th</sup> Avenue, #4  
Fort Lauderdale, FL 33334ARTICLE X - INDEMNIFICATION

The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

ARTICLE XI - AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law. Each amendment shall be approved by a majority vote of the stockholders at a meeting called therefor.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 16 day of May, 2003.

  
Michal Dvorak

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE  
SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS  
MAY BE SERVED.

IN COMPLIANCE WITH SECTION 607.051, FLORIDA STATUTES, THE  
FOLLOWING IS SUBMITTED

THAT Orion Services International, Inc. DESIRING TO ORGANIZE OR  
QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS PRINCIPAL  
PLACE OF BUSINESS AT THE CITY OF FT. LAUDERDALE, STATE OF FLORIDA,  
HAS NAMED John L. Tomlinson 500 NW 62<sup>nd</sup> Street, Ste 455 Fort  
Lauderdale, FL 33309 AS ITS AGENT TO ACCEPT SERVICE OF PROCESS  
WITHIN FLORIDA.

SIGNATURE Michal Dvorak

Michal Dvorak

Corporate Officer

TITLE President

DATE

5/16/03

Having been named as registered agent and to accept service of  
process for the above stated corporation at the place designated  
in this certificate, I hereby accept the appointment as registered  
agent and agree to act in this capacity. I further agree to  
comply with the provisions of all the statutes relating to the  
proper and complete performance of my duties and I am familiar  
with and accept the obligations of my position as registered agent

SIGNATURE

John L. Tomlinson  
(Resident Agent)

DATE

5/16/03

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