## P0300062356

4		
	(Requestor's Name)	<u> </u>
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	P WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of \$	Status
		<del></del>
Special Instruction	s to Filing Officer:	
		-
		j

Office Use Only



900019567309

06/02/03--01068--011 \*\*87.50

07-01-03

03 JUN -2 AN 7:3
SECRETARY OF STATE

and Ialla

## TRANSMITTAL LETTER

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

SUBJECT:	ear Solutions In	tegrated M	edia. Inc.			
	(PROPOSED CORPORATE	NAME – MUST INCLUDI	SUFFIX			
Enclosed is an original and one(1) copy of the articles of incorporation and a check for:						
□ \$70.00	\$78.75	<b>□</b> \$78.75	\$87.50			
Filing Fee	Filing Fee	Filing Fee	Filing Fee,			
1 111125 1 00	& Certificate of Status	& Certified Copy	Certified Copy			
	<b>CC</b>	as outside copy	& Certificate of			
			Status			
		ADDITIONAL CO	PY REQUIRED			
Yolanda Hooper						
Name (Printed or typed)						
P.O. Box 350459						
Jachsonville, FL 32235 City, State & Zip						
	(904)635-4 Daytime T	lele T	<u></u>			

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

	ARTICLES OF INCORPORATION	٠
	In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
٠	ARTICLE I NAME (7-01-0	
	The name of the composition shall be:	
•	Clear Solutions Integrated Media, Inc.	
	ARTICLE II PRINCIPAL OFFICE	•
	The principal place of business/mailing address is: 10990 Fort Caraline hoad, #350525 Tach Sorwill, FL 32235	
	ARTICLE III PURPOSE	
	The purpose for which the corporation is organized is: to provide various consultative services, and all other acts permitted for general and business corporation	er legal
	ARTICLE IV SHARES	e venez
	The number of shares of stock is:  5,000	
	ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
	The name(s), address(es) and title(s):  ALLARY OF STA	FILED 03 JW -2 M 7:
	ARTICLE VI REGISTERED AGENT	င္ မ
	The <u>name and Florida street address</u> of the registered agent is:	
	Volanda Hooper 18 Sterling Hill Drive Jacksonville, FL 32235	
	ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Volunda Hooper  Tuly 1, 2003.	e Date
	The name and address of the Incorporator is: The effective date shall	be
	Volanda Hooper July 1, 2003. P.O. Box 350459 Jachsonville, FL 32235	
	**************************************	
	certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	ece acoignates in in
	) Island A Thores 5-28-0	3
	Signature/Registered Agent Volunda Hooper Date	
<u> </u>	Molanda=Hoopen 5-28-1	03
-	Signature/Incorporator Volanda Hopper Date	