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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

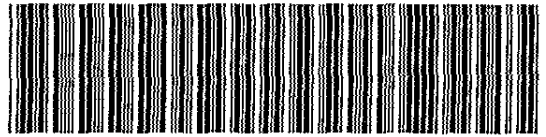
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/26/03--01064--013 **70.00

03 JUN 26 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

7-14-03

W03-18572

OWEN N. POWELL
ATTORNEY AT LAW
201 J. HARVEY ETHERIDGE STREET
P.O. BOX 788
BONIFAY, FLORIDA 32425

TEL: (850) 547-4257

FAX: (850) 547-3470

July 2nd, 2003

Secretary of State
Corporation Division
The Capitol
Tallahassee, Fl 32301


In Re: Articles of Incorporation TECHSTARE, INC.

Dear Sir:

Enclosed are the original and a duplicate copy of the Articles of Incorporation of the above named corporation to which I have made the appropriate changes as requested whereby upon search of your Internet site this corporate name was not active.

Thank you for your prompt attention to this matter.

Sincerely,



Owen N. Powell
ONP/ch
Encl:

PS: If you could process this a/s/a/p we would greatly appreciate.



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

RECEIVED

03 JUL -7 PM 12:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 30, 2003

OWEN N. POWELL, ESQ
201 J HARVEY ETHERIDGE ST
P O BOX 789
BONIFAY, FL 32425

JUL -2 2003

SUBJECT: TECH STAR, INC.
Ref. Number: W03000018572

We have received your document for TECH STAR, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

See the attached page for fees.,

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6930.

Donna Graves
Document Specialist
New Filings Section

Letter Number: 403A00039286

OWEN N. POWELL

ATTORNEY AT LAW

201 J. HARVEY ETHERIDGE STREET

P.O. BOX 788

BONIFAY, FLORIDA 32425

TEL: (850) 547-4257

FAX: (850) 547-3470

June 24th, 2003

Secretary of State
Corporation Division
The Capitol
Tallahassee, FL 32301

In Re: Articles of Incorporation **TECH STAR INC.**

Dear Sir:

Enclosed are the original and two duplicate copies of the Articles of Incorporation of the above named corporation.

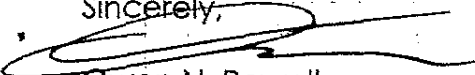
The duplicate copies have been subscribed and acknowledged by the subscriber in the same manner as the original. Please endorse your approval of the Articles of Incorporation on one of the duplicate copies, certify and return them to me at the above address.

Enclosed herewith is my check in the sum of \$70.00 made payable to your order representing fees for the following:

Filing Fee	\$20.00
Certified Copy	\$30.00
Resident Agent Form	<u>\$20.00</u>
	\$70.00

Your attention to this matter is appreciated.

Sincerely,


Owen N. Powell

• ONP/ch

Encls:



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03 JUN 26 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
TECHSTARE INC.
A FLORIDA CORPORATION**

The undersigned subscriber to these Articles of Incorporation are natural persons competent to contract, hereby forms a corporation for profit under the laws of the State of Florida.

Article I

NAME

The name of the corporation is **TECHSTARE INC.**

Article II

NATURE OF BUSINESS.

The general purposes for which the corporation is organized are :

(A) General equipment service and installation of equipment .

(B) To transact any other lawful business for which corporations may be incorporated under the Florida General Corporation Act or engage in any other trade or business which can, in the opinion of the board of directors of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business.

(C) To do such other things as are incidental to the foregoing or necessary or desirable in order to accomplish the foregoing.

Article III

CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any time is **500 (FIVE HUNDRED) shares of common stock**, each share having a par value of **FIVE DOLLARS (\$5.00)**.

Article IV

INITIAL CAPITAL

The minimum amount of capital with this corporation shall begin business is **TWO THOUSAND FIVE HUNDRED. (\$2,500.00)**

Article V

INITIAL ADDRESS AND AGENT

The corporation's initial registered agent for **TECHSTARE INC.** shall be

B. EARL HARVARD

and the initial registered principal address of said registered agent is:

1841 Highway 179, Bonifay, Florida 32425

and said address shall be the mailing address of the corporation and shall be the principal office with the same address as the registered office or registered agent of **TECHSTARE INC.**

Article VI

TERM OF EXISTENCE

This corporation shall have perpetual existence.

B. Earl Harvard

B. EARL HARVARD
Resident Agent & President
TECHSTARE INC.

Article VII

DIRECTORS

The corporation shall have **TWO** director initially. The number of directors may be increased or diminished from time to time by By-Laws adopted by the stockholders but shall never be less than one.

Article VIII

INITIAL DIRECTORS

The name and address of the directors who shall hold office until their successors are elected are as follows:

WILLIAM HARVARD 1925 County Road 1157 TROY, ALABAMA 36079	250 SHARES	\$1,250.00
B. EARL HARVARD 1841 Highway 179 BONIFAY, FL 32425	250 SHARES	\$1,250.00

Article IX

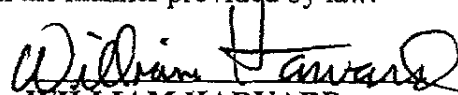
EFFECTIVE DATE

The Articles of Incorporation shall be effective on the **26TH DAY OF JUNE, 2003.**

Article X

AMENDMENT

These Articles of Incorporation may be amended in the manner provided by law.


WILLIAM HARVARD
Director
TECHSTARE, INC.



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

FILED
03 JUN 26 PM 2:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

In compliance with *Chapter 607* of the Florida Business Corporation Act, the following is submitted:

TECHSTARE, INC, with its place of business at **1841 Highway 179, Bonifay, Florida 32425**, has named **B. EARL HARVARD**, located at **1841 Highway 179, Bonifay, Florida 32425** as its agent to accept service of process within Florida.

Dated this 26th day of June, 2003


WILLIAM HARVARD
Director- TECHSTARE, INC.

B. EARL HARVARD
Director
TECHSTARE, INC.

Having been named to accept service of process of the above-stated corporation, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of *Section 607.0501 and 607.0504 of the Florida Corporation Act*, and I am as registered agent familiar with and accept the obligations of this position.


B. EARL HARVARD
Resident Agent
TECHSTARE, INC.

FILED

03 JUN 26 PM 2:40

STATE OF FLORIDA
COUNTY OF HOLMES

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I hereby certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared

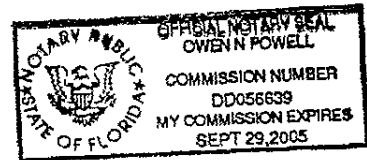
WILLIAM HARVARD

known to me to be the persons described in and who executed the foregoing instrument, who acknowledged before me that they executed the same, and an oath was not taken. (Check one)
 Said person(s) is personally known to me. Said person(s) provided the following type of identification: LICENSE # 2A0 679160

Witness my hand and official seal in the County and State last aforesaid on this ___ day of JUNE, 2003.

[Handwritten Signature]
Notary Signature

Owen N Powell
Printed Name



STATE OF FLORIDA
COUNTY OF ORANGE

I hereby certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared

B. EARL HARVARD

known to me to be the persons described in and who executed the foregoing instrument, who acknowledged before me that ~~they~~^{he} executed the same, and an oath was not taken. (Check one)
 Said person(s) is personally known to me. Said person(s) provided the following type of identification: FL DRIVER LICENSE

Witness my hand and official seal in the County and State last aforesaid on this 20th day of JUNE, 2003.

[Handwritten Signature]
Notary Signature

CORA JEAN KING
Printed Name



Cora Jean King
MY COMMISSION # DD071500 EXPIRES
December 14, 2005
BONDED THROUGH TROY FAH INSURANCE, INC.