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## TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SUBJECT: SOLUCON INVESTMENTS INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: **ॼ**\$87.50 \$78.75 \$78.75 \$70.00 Filing Fee & Certified Copy Filing Fee Filing Fee, Filing Fee & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: OLUSOLABOMI OLA OLUSANYA
Name (Printed or typed) 14550 BRUCE B DOWNS BLV0 #113 TAMPA FL 33613
City, State & Zip 1 - 813 - 979 - 9627

Daytime Telephone number

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