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TRANSMITTAL LETTER

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

INTRINSIC DESIGN. NET, INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00

\$78.75

Filing Fee

Filing Fee

& Certificate of Status

\$87.50

Filing Fee & Certified Copy Filing Fee,

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:

K A. RASHEED Name (Printed or typed)

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

ARTICLES OF INCORPORA In compliance with Chapter 607 and/o	ATION or Chapter 621, F.S. (Profit)	SECRETARY OF STATE DIVISION OF CORPORATION
ARTICLE I NAME The name of the corporation shall be:	INTRINSIC DESIGN, NET, IN	03 NOV 12 PM 4: 54

PRINCIPAL OFFICE

925 E.MAGNOLIA DR. H-2 The principal place of business/mailing address is: TALLAHASSEE, FLORI OA

32301

PURPOSE *ARTICLE III*

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

THOMAS A. RASHEED (PRESIDENT) 925 E, MAGNOUA DR, H-2 TALLAHASSEE, FLORINA 32301

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

THOMAS A, RASHEED 925 E. MAGNOLLA DR. H-2 TALLAHASSEE FLORIDA 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

THOMAS A RASHEED 925 E, MAGNOLIA DR. H-2 TALLAHASSEE, FLORUNA 32301

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Incorporator