

P03000131179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

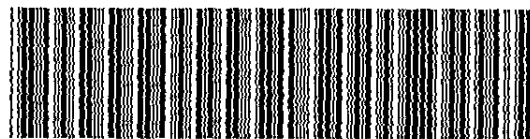
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/07/03--01038--008 **70.00

EFFECTIVE DATE
10-31-03

FILED
03 NOV -7 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

62
11-13

TRANSMITTAL LETTER

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

SUBJECT: SYBRIX, Inc.
~~(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)~~

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

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

David Smith
Name (Printed or typed)

7469 Red CRANE LANE
Address

Jacksonville, FL 32256
City, State & Zip

(904) 535-8785
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Sybrix, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7469 Red Crane Ln
Jacksonville, FL 32256

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sale of SOFTWARE ONLINE & SOFTWARE RELATED SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

David Smith - President
P.O. Box 19022
Jacksonville, FL 32245

ARTICLE VI REGISTERED AGENT

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

David Smith
7469 Red Crane Ln
Jacksonville, FL 32256

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David Smith
7469 Red Crane Ln
Jacksonville, FL 32256

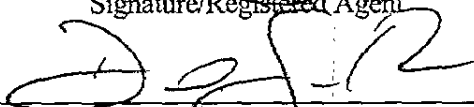
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

11/5/03

Date



Signature/Incorporator

11/5/03

Date

FILED
03 NOV -7 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE
10-31-03

ARTICLE VIII EFFECTIVE DATE

OCTOBER 31, 2003