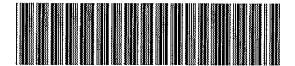
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· (Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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191.

TRANSMITTAL LETTER

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

SUBJECT:	alte reclinology Corporation		
	(PROPOSED CORPOR	TE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the art	ticles of incorporation and	a check for:
□ \$70.00	□ \$78.75	\$78.75	☑ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of
			Status
		ADDITIONAL CO	PY REQUIRED
		<u> </u>	
ħ	April Docob		
FROM: _N	Mark Roach		
	Nam	e (Printed or typed)	
	501 Dew Drop Cove		
		Address	
	Casselberry, Fl 32707		
		, State & Zip	77 SEE
	0.10	, van oc zip	
	407-699-4555		
	Daytime 1	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)

FILED

ARTICLE I NAME

The name of the corporation shall be: Erudite Technology Corporation 04 MAR - 1 PM 5: 59

SECRETAN . . TATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 501 Dew Drop Cove Casselberry, FI 32707

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Computer support services

ARTICLE IV SHARES

The number of shares of stock is: 10000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mark Roach - 501 Dew Drop Cove, Casselberry, Fl, 32707 - President

ARTICLE VI REGISTERED AGENT

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

Mark Roach 501 Dew Drop Cove Casselberry, Fl 32707

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mark Roach 501 Dew Drop Cove Casselberry, Fl 32707

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

2/27/04

Date

2/27/04

Date

Signature/Incorporator