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TRANSMITTAL LETTER

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

SUBJECT:	FIRST STRIKE	SOLUTIONS	INC,
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	IDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	NATHAN K Name	<u>.</u>	
	SOOY MANGRON Kissimmee		
	407-694 Daytime	-4326 Telephone number	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be:
FIRST STRIKE SOLUTIONS, INC
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 5004 MANGROVE ALLIEY #201 KISSIMMEE, FL 34747
ARTICLE III PURPOSE ω
The purpose for which the corporation is organized is: Operational workflow & Business
Concultation
ARTICLE IV SHARES The number of shares of stock is: 100
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
CED NATHAN KELLEY 5004 MANGROVE ALLET #201 KISSIMME FL 34747 V.P BRAD EASTMAN SOOK MANGROVE ALLET #201 KISSIMMEE FL 34747
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: NATHAN KELLEY SOON MANGROVE ALLEY #201 KISSIAMEE FL 3474
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
NATION RELIEY SOOT MANGLOVE ALLEY # 201 KISINGE FLZY

not not solution
Signature/Incorporator Date

ARTICLES OF INCORPORATION