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# TRANSMITTAL LETTER

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

SUBJECT:	LJS INFORMATION SYSTEMS, INC.		
Enclosed is	an original and one (1) copy of the Certificate of Domestication and a check fo	r:	
FEES:			
Artic	tificate of Domestication \$50.00 lcles of Incorporation and Certified Copy al to domesticate and file \$128.75		
<u>OPTIONAL</u>	<u>L:</u>		
Cert	tificate of Status \$ 8.75		
FRO	OM: LOWELL J. SENITZ		
	Name (printed or typed)		
	4109 OLDE MEADOWBROOK LANE		
	Address		
	BONITA SPRINGS, FL 34134		
	City, State & Zip		
	(239) 340-2980		
	Daytime Telephone Number		

, CERTIFICATE OF DOMESTICATION	O4 AUG		
The undersigned, LOWELL J. SENITZ , OWNER/PRESIDEN	125至 2 产 ,		
(Name) (Title)	THE P		
of LJS INFORMATION SYSTEMS, INC. a fo	reign corporation,		
(Corporation Name) in accordance with s. 607.1801, Florida Statutes, does hereby certify:	AND A		
The date on which corporation was first formed wasSEPTEMBER 28	, 1993		
2. The jurisdiction where the above named corporation was first formed, incorpor came into being was STATE OF DELAWARE	rated, or otherwise		
3. The name of the corporation immediately prior to the filing of this Certificate of was LJS INFORMATION SYSTEMS, INC.	of Domestication		
4. The name of the corporation, as set forth in its articles of incorporation, to be fit s. 607.0202 and 607.0401 with this certificate is LJS INFORMATION SYSTEMS.	-		
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was STATE OF COLORADO			
<ol> <li>Attached are Florida articles of incorporation to complete the domestication red to s. 607.1801.</li> </ol>	quirements pursuant		
I am OWNER , of LJS INFORMATION SYSTEMS, INC.			
and am authorized to sign this Certificate of Domestication on behalf of the corporate	ation and have done		
so this the 30 day of JULY	, 2004		
Lowell Kint			
(Authorized Signature)	-		

Filing Fee: Certificate of Domestication Articles of Incorporation and Certified Copy Total to domesticate and file

\$50.00 <u>\$78.75</u> \$128.75

## ARTICLES OF INCORPORATION

IN COMPLIANCE WITH CHAPTER 607, F.S.

#### ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE: LJS INFORMATION SYSTEMS, INC.

#### ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS: 4109 OLDE MEADOWBROOK LANE **BONITA SPRINGS, FL 34134** 

ARTICLE III *PURPOSE* 

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: PROVIDE REAL ESTATE SERVICES/COMPUTER SERVICES/TRAVEL SERVICES

#### ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100 OWNED BY: LOWELL J. SENITZ - PRESIDENT 34134)

(4109 OLDE MEADOWBROOK LANE - BONITA SPRINGS, FI

### ARTICLE V INITIAL DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

LOWELL J. SENITZ - PRESIDENT

LOWELL J. SENITZ - SECRETARY

(4109 OLDE MEADOWBROOK LANE - BONITA SPRINGS, FL 34134)

(4109 OLDE MEADOWBROOK LANE - BONITA SPRINGS, FL 34134)

SALLY C. SENITZ - TREASURER

(4109 OLDE MEADOWBROOK LANE - BONITA SPRINGS, FL 34134) SALLY C. SENITZ - VICE PRESIDENT (4109 OLDE MEADOWBROOK LANE - BONITA SPRINGS, FL 34134)

#### ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The <u>name and Florida street address</u> (p.o. box **not** acceptable) of the registered agent is:

SALLY C. SENITZ - VICE PRESIDENT (4109 OLDE MEADOWBROOK LANE - BONITA SPRINGS, FL 34134)

#### ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

LOWELL J. SENITZ - PRESIDENT

(4109 OLDE MEADOWBROOK LANE - BONITA SPRINGS, FL 34134)

HAVING BEEN NAMED AS REGISTERED AGENT AND 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

Signature/Incorporator