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TRANSMITTAL LETTER

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

SUBJECT:	COGNOLOG (PROPOSED CORPORA	Y SOLUTI ATENAME- <u>MUST INCL</u>		→ ···
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	DPY REQUIRED	٠ ـــ.
FROM:		e (Printed or typed) AVENUE Address	· · · · · · · · · · · · · · · · · · ·	OF VIEW 30

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

Daytime Telephone number

954-658-0728

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: COGNOLOGY SOLUTIONS, INC ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 1041 NW 110th AVENUE, PLANTATION FL. 33322 ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: ANY PURPOSE ALLOWED PURSUANT FLORIDA BUSINESS ARTICLE IV SHARES The number of shares of stock is: 100 Shares AT 1.00 PAR VALUE INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Christopher Cognetta 1041 NW 110th AVENUE PLANTATION, FC 33322 DIRECTOR, PRESIDENT, VICE-PRISIDENT, TREASUREN, SECRETA REGISTERED AGENT ARTICLE VI The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Christopher CognizITA PLANTATION, FL 3332Z

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Christopica Cognette 1041 NW 110th AVENUE PHANTATIOD, FL 33322

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

Date

8/24/04

Date

8/24/04

Date