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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
During F His Many				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special management				
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SECRETARY OF STATE
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RECEIVED

## TRANSMITTAL LETTER

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

SUBJECT: Blueston	ne Information Systems Inc.	<u>-</u>	
-	(PROPOSED CORPORATION OF the article)		
\$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
FROM:		CAPA LLT (Printed or typed)	
-	3096 HARPERS F	ERRY DR.	<u></u>
	•	State & Zip	
	850 - 383 Daytime To	5 – 6316 elephone 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 SECRETARY OF STATE TALLAHASSEE, FLORIDA

05 MAR -4 PM 12: 17

# ARTICLE I NAME

The name of the corporation shall be:

Bluestone Information Systems Inc.

#### ARTICLE II _ PRINCIPAL OFFICE

The principal place of business/mailing address is: 3096 Harpers Ferry Dr, Tallahassee, FL-32308

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

### ARTICLE IV SHARES

The number of shares of stock is: 1000 at NO par value per share

## ARTICLE V __INITIAL OFFICERS AND/OR DIRECTORS

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

Title: P.D

Muralidhar Devarapalli

3096 Harpers Ferry Dr,

Tallahassee, FL-32308.

#### ARTICLE VI ___ REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Capital Connection Inc. 417 E. Virginia Street Tallahassee, Florida 32301

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MURALIDHAR DEVARA PALLI 3096 HARPERS FERRY DR,

TALLAHASSE, FL - 32308

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

Stace Place
Signature Registered Agent

3/4/05
Date

Stacey Piland for Capital Connection Inc.

Signature/Incorporator

314105 Date