

POS0000108175

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(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

SUBJECT: PAGOSA SOLUTIONS, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$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

**ADDITIONAL COPY REQUIRED**

FROM: Linda H. South  
Name (Printed or typed)

322 East Central Blvd. #703  
Address

Orlando FL 32801  
City, State & Zip

407-517-0488 or cell 321-302-5413  
Daytime 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)

### ARTICLE I NAME

The name of the corporation shall be:

PAGOSA SOLUTIONS, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

322 E. CENTRAL BLVD. #703  
ORLANDO FL 32801

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
PROFESSIONAL BUSINESS SERVICES

### ARTICLE IV SHARES

The number of shares of stock is:  
501

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LINDA H. SOUTH, PRESIDENT, SECRETARY, TREASURER  
322 EAST CENTRAL BLVD. #703  
ORLANDO FL 32801

### ARTICLE VI REGISTERED AGENT

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

LINDA H. SOUTH, REGISTERED AGENT  
322 EAST CENTRAL BLVD. #703  
ORLANDO FL 32801

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


LINDA H. SOUTH  
322 EAST CENTRAL BLVD. #703  
ORLANDO FL 32801

\*\*\*\*\*

*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*

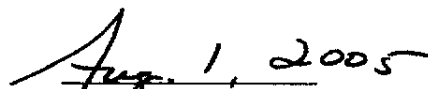


Signature/Registered Agent

  
Date



Signature/Incorporator

  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA