

Pos 800117157

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

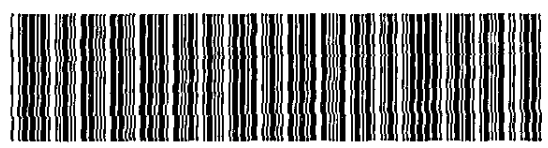
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100058724691

08/23/05--01042--024 \*\*87.50

FILED  
05 AUG 23 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
05 AUG 23 PM 12:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8-23-05

**TRANSMITTAL LETTER**

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

**SUBJECT:** SG One Enterprises, 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:** Alison A. Hewitt  
Name (Printed or typed)

10499 Casanova Drive  
Address

Tallahassee, Florida 32317  
City, State & Zip

813-943-9910  
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)

**FILED**  
05 AUG 23 PM 12:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

SG One Enterprises, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

10499 Casanova Drive  
Tallahassee, Florida 32317

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Consulting

**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):

President Eric D. Wiseman 10499 Casanova Drive Tallahassee, Florida 32317  
Vice-President Alison A. Hewitt 3610 East Dr. MLK, Jr. Blvd. Tampa, Florida 33610

**ARTICLE VI REGISTERED AGENT**

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

Alison A. Hewitt  
3610 E. Dr. MLK, Jr. Blvd.  
Tampa, Florida 33610

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Alison A. Hewitt  
3610 E. Dr. MLK, Jr. Blvd.  
Tampa, Florida 33610

\*\*\*\*\*

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

Alison A. Hewitt  
Signature/Registered Agent

8-23-05  
Date

Alison A. Hewitt  
Signature/Incorporator

8-23-05  
Date