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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4119  
SS

## COVER LETTER

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

SUBJECT: SOFT BIZ 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: APARNA CHALASANI  
Name (Printed or typed)

8787 SOUTHSIDE BLVD SUITE #1316  
Address

JACKSONVILLE, FL 32256  
City, State & Zip

248 - 342 - 4080  
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:

SOFT BIZ SOLUTIONS INC;

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8787 SOUTHSIDE BLVD SUITE 1316  
JACKSONVILLE FL 32256

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful business

## ARTICLE IV SHARES

The number of shares of stock is: CLASS: COMMON

NUMBER OF SHARES AUTHORIZED 1000, NUMBER OF SHARES PROPOSED TO ISSUE 1000  
CONSIDERATION TO BE RECEIVED THEREFORE 1000.00, TOTAL \$ 1000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

APARNA CHALASANI, 8787 SOUTHSIDE BLVD #1316, PRESIDENT  
JACKSONVILLE FL 32256

## ARTICLE VI REGISTERED AGENT

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

APARNA CHALASANI, 8787 SOUTHSIDE BLVD #1316, JACKSONVILLE FL 32256

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

APARNA CHALASANI 8787 SOUTHSIDE BLVD #1316 JACKSONVILLE FL  
32256

\*\*\*\*\*

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

C. Aparna

Signature/Registered Agent

04/08/06

Date

C. Aparna

Signature/Incorporator

04/08/06

Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA