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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.  
Account Number : I20000000257  
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FLORIDA PROFIT/NON PROFIT CORPORATION

PREMIER BUSINESS SOLUTIONS INC.

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CAPITAL CONNECTION

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NO. 1419 P. 2  
Florida Dept of State



August 11, 2006

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

YOUR CAPITAL CONNECTION, INC.

SUBJECT: PREMIER BUSINESS SOLUTIONS INC.  
REF: W06000035502

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

NAME CONFLICT WITH P00000054205, PREMIER BUSINESS SOLUTIONS, INC.

If you have any further questions concerning your document, please call (850) 245-6933.

Dale White  
Document Specialist  
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TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
**OF**  
**PREMIER BUSINESS SOLUTIONS INC.**

The undersigned subscriber to these Articles of Incorporation under Sub Chapter S, hereby forms a corporation under the laws of the State of Florida.

**ARTICLE I - NAME**

The name of this corporation is: **PREMIER BUSINESS SOLUTIONS INC.**

The principal place of business and mailing address of this corporation is :  
**3814 KAKOPO STREET PORT SAINT LUCIE, FL 34953-3627**

**ARTICLE II - NATURE OF BUSINESS**

This corporation may engage in any business activity permitted under the laws of the United States and the State of Florida.

**ARTICLE III - CAPITAL STOCK**

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one-hundred (100) shares of common stock with no par value per share.

**ARTICLE IV - TERM OF EXISTENCE**

The existence of the corporation shall commence on the date of filing, and shall be perpetual.

**ARTICLE V - OFFICERS DIRECTORS**

The name and street address of the initial officer and director, who shall hold office for the corporation are:

**PRESIDENT:**

**JOSEPH A. COLES  
3814 KAKOPO STREET  
PORT SAINT LUCIE, FL. 34953-3627**

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**ARTICLE VI - INCORPORATOR**

The name and street address of the incorporation to this article of incorporation is:

JOSEPH A. COLES  
3814 KAKOPO STREET  
PORT SAINT LUCIE, FL 34953-3627

WHEREOF, the undersigned incorporator has executed these ARTICLES OF INCORPORATION this 10 day of August, 2006.

Signature of Incorporator



STATE OF FLORIDA  
COUNTY OF ST. LUCIE

THE FOREGOING instrument was acknowledged and sworn to by Joseph A. Coles before me this 10 day of August, 2006.

James E. Childs  
My Commission D0952792  
Expires September 07, 2008

(SEAL)

  
Notary Public

ARTICLES OF INCORPORATION FILING FEE: \$35.00  
REGISTERED AGENT FILING FEE: \$35.00  
CERTIFIED COPY REQUESTED: \$8.75

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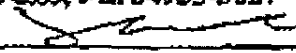
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**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325 Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: **PREMIER BUSINESS SOLUTIONS INC.**
2. The name and address of the registered agent and office is:

**JOSEPH A COLES**  
**3814 KAKOPO STREET**  
**PORT SAINT LUCIE, FL. 34953-3627**

  
Corporate Officer

  
President  
Title

8-10-06  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**HAVE BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION. AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.**

  
Registered Agent

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