

P08000063881

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

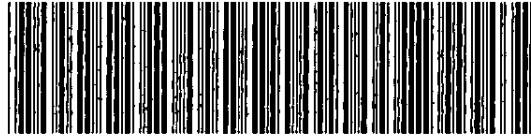
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 JUL -2 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature

COVER LETTER

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

SUBJECT: PRAXSOFT, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: AMIN ISMAIL
Name (Printed or typed)

10327 NEWINGTON DR
Address

ORLANDO, FL 32836
City, State & Zip

407-903-9396 x113
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ORIGINAL

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:

PRAXSOFT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

10327 NEWINGTON DR, ORLANDO, FL 32836

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROMOTE RESEARCH & DEVELOPMENT OF HIGH TECHNOLOGY
PRODUCTS AND SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RHONDA COPLEY, 10327 NEWINGTON DR, ORLANDO, FL 32836 —
PRESIDENT

AMIN ISMAIL, 10327 NEWINGTON DR, ORLANDO, FL 32836 — VICE
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

AMIN ISMAIL
10327 NEWINGTON DR
ORLANDO, FL 32836

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

RHONDA COPLEY
10327 NEWINGTON DR
ORLANDO, FL 32836

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

Signature/Incorporator

7/1/08

Date

07/01/08

Date

FILED
08 JUL -2 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA