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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

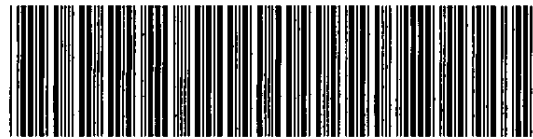
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: CW 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: BRIAN COSTELLO
Name (Printed or typed)

10242 NW 47 ST., SUITE #17
Address

SUNRISE, FL 33351
City, State & Zip

877-756-9865
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:

CW SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

*10242 NW 47 ST., SUITE #17
SUNRISE, FL 33351*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

STRUCTURED CABLING CONTRACTOR

ARTICLE IV SHARES

The number of shares of stock is:

*100 - BREAKDOWN 50 - JENNIFER COSTELLO
50 - CARA WEBSTER*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*JENNIFER COSTELLO - PRESIDENT - 10242 NW 47 ST., #17, SUNRISE, FL 33351
CARA WEBSTER - VICE PRESIDENT - 10242 NW 47 ST., #17, SUNRISE, FL 33351
BRIAN COSTELLO - TREASURER - 10242 NW 47 ST., #17, SUNRISE, FL 33351*

ARTICLE VI REGISTERED AGENT

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

CLINT WEBSTER - 10242 NW 47 ST., #17, SUNRISE, FL 33351

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JENNIFER COSTELLO - 10242 NW 47 ST., #17, SUNRISE, FL 33351

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

Date

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA