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(Requestor's Name)			
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PICK-UP	■ WAIT	MAIL	
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(Document Number)			
Certified Copies	_ Certificate	es of Status	
Special Instructions to	Filing Officer:		
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07/22/09-01008-007 \*\*78.75

# **COVER LETTER**

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

SUBJECT:	COMPUTER SYSTEM NETWORK				
	(PROPOSED CORPORA	ATE NAME - <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	l a check for:		
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☑ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status		
		ADDITIONAL CC	- REQUIRED		
FROM:		SYSTEM NETWORK le (Printed or typed)			
		FATE RD 7 STUITE#:	29		
<del></del>		Address			
	MIRAMAR FLORIDA				
	City	, State & Zip			
		-204-5926 Telephone number			
	·	•			
<del>_</del>	E-mail address: (to be use	msnlive.com ed for future annual report	notification)		

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



# FLORIDA DEPARTMENT OF STATE Division of Corporations

July 23, 2009

COMPUTER SYSTEM NETWORK 3600 SOUTH STATE ROAD 7 SUITE #29 MIRAMAR, FL 33023

SUBJECT: COMPUTER SYSTEM NETWORK

Ref. Number: W09000033719

We have received your document for COMPUTER SYSTEM NETWORK and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Regulatory Specialist II

Letter Number: 009A00025366

DEPARTHENT OF STATE

### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTYCLE I NAME

The name of the corporation shall be:

Computer System Network TNC

### ARTICLE II PRINCIPAL OFFICE

The principal **street** address and mailing address, if different is: 3600 South State Rd 7 Suite #29 Miramar FI 33023

#### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: cell phone sale ,computer repair and sale

### ARTICLE IV SHARES

The number of shares of stock is:

100

# INITIAL OFFICERS AND/OR DIRECTORS

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

Celeste Broderick

:Presendent

Fabian Wright

: Vic Presendent

3600 south State Rd 7 Miramar FI 33023

#### ARTICLE VI REGISTERED AGENT

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

Fabian Wright

3600 south state Rd 7 Miramar FI 33023

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Celeste Broderick

3600 south state Rd 7 Miramar Fl 33023

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 07 /20 /09 Signature/Registered

Signature/Incorporator

Date 07/20/09

Date