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| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
| (Business Chary Name)                   |
|   |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SEENC JARY OF SIBJE VLLAHASSEE, FLORIDA

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911/20/09

# **COVER LETTER**

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

| SUBJECT:   | Altai Systems, Inc.  (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)                        |                                     |              |             |  |
|--|---|-------------------------------------|--------------|-------------|--|
| Enclosed are an origi  | nal and one (1) copy of the artic   | eles of incorporation and a         | check for:   | <del></del> |  |
| \$70.00 Filing Fee   | ☐ \$78.75 Filing Fee & Certificate of Status  | \$78.75 Filing Fee & Certified Copy | Status       | f           |  |
| FROM:  |   | ADDITIONAL COR                      | Y REQUIRED   | J           |  |
| Name (Printed or typed)  6753 Thomasville, Rd., PMB 108-323                    |   |                                     |              |             |  |
| Tallahassee, FL 32312 City, State & Zip  850-668-5659 Daytime Telephone number |   |                                     | SE ONE TO    | 09 NOV 20   | er de la companya de |
|  |   |                                     | SSEE FL      | PH          |  |
| ———  | jmartin@altaisystems.com E-mail address: (to be used for future annual report notification) |                                     | otification) | 2: 23       |  |

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

## ARTICLES OF INCORPORATION

NAME

The name of the corporation shall be:

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

FILED

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Altai Systems, Inc.

SECRETARY OF STATE TALBAHASSEE, FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 9413 Buck Haven Trail, Tallahassee, FL 32312 (street) 6753 Thomasville Rd., PMB 108-323, Tallahassee, FL 32312 (mailing)

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide business and technology consulting services in the state of Florida as well as the United States.

## ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE I

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Howard Frye, 752 Oak Grove Circle, Severna Park, MD 21146-President; Jonathan T. Martin, 9413 Buck Haven Trail, Tallahassee, FL 32312 (Vice President)

#### ARTICLE VI REGISTERED AGENT

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

Jonathan T. Martin, 9413 Buck Haven Trail, Tallahassee, FL 32312

#### ARTICLE VII INCORPORATOR

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

Jonathan T. Martin, 9413 Buck Haven Trail, Tallahassee, FL 32312

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 Date

| 1-20-09 |
| Signature/Incorporator Date