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Certified Copies	_ Certificates	of Status	
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SECRETARY OF STATE

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7,0

COVER LETTER

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

SUBJECT: FINANCIAL SolutionS, Inc.

(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFIX)

Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	a cneck for:
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY KEUUIKED

FROM: Walter + GANN JR. Name (Printed or typed)
Name (Printed or typed)
307 STORMY COVE
Address
Longwood, FL 32750 City, State & Zip
City, State & Zip
407 401-9492
Daytime Telephone number
Wattergannecfl. rr. Lom
E-mail address: (to be used for future annual report potification)

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

A VIÇLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, I	F.S. (Profit)
ARTICLE I NAME	
The name of the corporation shall be:	Sal UTTANS, INC.
DIG FINANCIAL	2020, 20, 2
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if diffe	
307 STORMY COVE	TA S
Longwood, FL 32750	
ARTICLE III PURPOSE	ZOID MAR -3 P 7 SECRETARY OF S TALLAH ASSEE, FL
The purpose for which the corporation is organized is:	SSR 3
Finance: Insurance	mg n
	FLL ST
ARTICLE IV SHARES	FILED 2010 MAR -3 P 2: 34 SECRETARY OF STATE FALLAHASSEE, FLORID
The number of shares of stock is:	P
100	
ARTICLE V INITIAL OFFICERS AND/OR	DIDECTORS
List name(s), address(es) and specific title(s):	
Walter P. GANN JR. Ple	:Sident
307 STORMY LOVE	
Longwood, FL 3 2750	
ARTICLE VI REGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT	acceptable) of the registered agent is:
GANN, Walter P. JR.	
307 STORMY COVE	
LONG WOOD, FL 32750	
The name and address of the Incomposite in	
The <u>name and address</u> of the Incorporator is: Walter P. GASN JR.	
307 STOR MY COVE	
Long Wood, FL 32750	
***********	*************
Having been named as registered agent to accept ser	vice of process for the above stated corporation at the
place designated in this certificate, I am familiar with	h and accept the appointment as registered agent and
agree to act in this capacity	
10	02/27/10
Signatune/Registered Agent	Date
del A	02/27/10 Date 02/27/10
Signature/Incorporator	
Signature/incorporator	Date