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(Requestor's Name)				
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(Address)				
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PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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TO ACKNOWLEDGE SUFFICIENCY OF FILIN DEPARTMENT OF STATE DIVISION OF CORPORATIONS

2010 APR -1 PH 12: 54

TILED

TO APR - 1 PH 12: 58

SECRETARY OF STATE

ALLAHASSE OF STATE



COVER LETTER

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

SUBJECT:	MEGA SOFTWARE SOLUTIONS Inc			
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:	
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	SATYA VENKATA LAXMI SOUJANYA MARTHI Name (Printed or typed) 4107 KIPLING CT			
	Address			
	TALLAHASSEE, FL-32311 City, State & Zip			
	850	0-320-2178		
	Daytime T	elephone number		
		rthi@gmail.com		
	E-mail address: (to be used	for future annual report n	notification)	

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:

MEGA SOFTWARE SOLUTIONS Inc.

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TO APR - I PH 12: 58

SECRETARY OF STATE
TALEAHASSEE, FLORIO

ARTICLE II PRINCIPAL OFFICE	ALEAHASSEE. FLORIDA
The principal street address and mailing address, if different is:	LUNIUA .
4107 KIPLING CT, TALLAHASSEE,FL-32311	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: Any and all legal Perposes for which in confortated under the amended FLORI	h business may be DA conformation act.
ARTICLE IV SHARES	
The number of shares of stock is: 100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	q
List name(s), address(es) and specific title(s):	2
Soujanya Marthi, Director.	
4107 KIPLING CT, TALLAHASSEE,	
FL-32311	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Satya Venkata Laxmi Soujanya Marthi	
4107 KIPLING CT, TALLAHASSEE,FL-32311	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Satya Venkata Laxmi Soujanya Marthi	
4107 KIPLING CT, TALLAHASSEE,FL-32311	

Having been named as registered agent to accept service of proces	
place designated in this certificate, I am familiar with and accept	the appointment as registered agent and
agree to act in this capacity	. 1
1 towns	OU/I In
Signature/Registered Agent	Date
Signature/Registered Agent	nu lilio
- Sovjand	
Signature/Incorporator	Date