

P10000037382

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TALLAHASSEE, FLORIDA  
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15310-08

## COVER LETTER

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

**SUBJECT:** Conexions Direct 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** David C. Carmichael  
Name (Printed or typed)

P.O. Box 2383  
Address

Goldenrod, FL 32733  
City, State & Zip

321-460-4914  
Daytime Telephone number

Harley007@live.com  
E-mail address: (to be used for future annual report 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:

Conexions Direct Inc.

## **ARTICLE II PRINCIPAL OFFICE**

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

Principal Office: | Mailing Address:

4107 Plantation Lakes Circle | P.O. Box 2383

Sanford, FL. 32771 | Goldenrod, FL. 32733

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Internet / On-Line Services

## **ARTICLE IV SHARES**

The number of shares of stock is:

10

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

David | P.O. Box 2383

Carmichael | Goldenrod, FL.

(C.E.O.) | 32733

## **ARTICLE VI REGISTERED AGENT**

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

David, Carmichael

4107 Plantation Lakes Circle

Sanford, FL. 32771

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

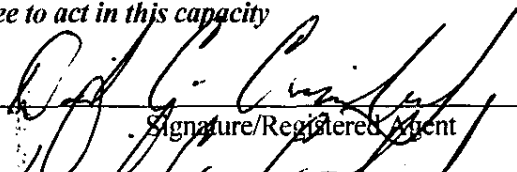
David, Carmichael

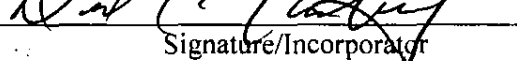
P.O. Box 2383

Goldenrod, FL. 32733

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*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

4/19/2010

Date

4/19/2010

Date

FILED  
10 APR 30 AM 9:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA