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(Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: NATIONAL RESOURCES MANAGEMENT SYSTEMS, 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 Filing Fee	☐ $78.75 Filing Fee & Certificate of Status	☐ $78.75 Filing Fee & Certified Copy	☒ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: JOEL SHIFFLER
Name (Printed or typed)

2027 SETON DRIVE
Address

CLEARWATER, FLORIDA, 33763
City, State & Zip

304-494-4129
Daytime Telephone number

iamdada00@yahoo.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:

NATIONAL RESOURCES MANAGEMENT SYSTEMS, INC.

ARTICLE II PRINCIPAL OFFICE

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

PRINCIPLE: 2027 SETON DRIVE, CLEARWATER, FL 33763
MAILING: P.O.BOX 4370 PARKERSBURG WV 26104.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COMPUTER FILES AND INFORMATION ACCESS.

ARTICLE IV – SHARES

The number of shares of stock is:

100 (one hundred)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOEL D. SHIFFLER (OFFICER) P.O. BOX 4370
PARKERSBURG WV
26104.

ARTICLE VI REGISTERED AGENT

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

JOEL D. SHIFFLER
~~P.O.BOX~~ 2027 SETON DRIVE
CLEARWATER FL 33763

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

JOEL D. SHIFFLER
2027 SETON DR.
CLEARWATER FL 33763

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TALLAHASSEE, FLORIDA

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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

Joel Shiffler JOEL SHIFFLER — MAY 26 2010
Signature/Registered Agent — Date

Joel Shiffler JOEL SHIFFLER — MAY 26 2010
Signature/Incorporator — Date