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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

\*\*Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
LEGAL CLIENT SOLUTIONS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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Help

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H10000199820 3

**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:

Legal Client Solutions, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

14255 U.S. Hwy One, #210  
Juno Beach, FL 33408**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Professional Corporation

**ARTICLE IV SHARES**

The number of shares of stock is:

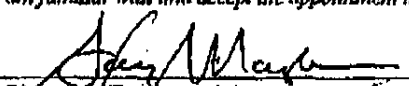
10,000

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

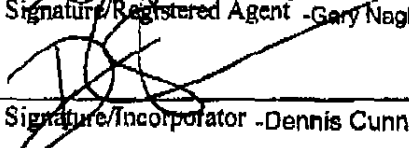
List name(s), address(es) and specific title(s):

Dennis Cunningham  
14255 U.S. Hwy One, #210  
Juno Beach, FL 33408**ARTICLE VI REGISTERED AGENT**The name and Florida street address of the registered agent is:Gary Nagle  
14255 U.S. Hwy One, #210  
Juno Beach, FL 33408**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Dennis Cunningham  
14255 U.S. Hwy One, #210  
Juno Beach, FL 33408

\*\*\*\*\*  
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 -Gary Nagle

09/08/2010

\_\_\_\_\_  
Date  
\_\_\_\_\_  
Signature/Incorporator -Dennis Cunningham

09/08/2010

\_\_\_\_\_  
Date

H10000199820 3

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