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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:	ommunication 5 (PROPOSED CORPORA	olutions of T ate name-must incl	ampa Inc
Enclosed are an original	ginal and one (1) copy of the art	icles of incorporation and	l 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 of Status PY REQUIRED
	816 Poinsettial	e (Printed or typed) Address	
_	Tampa, FL 33 (813) >48-3455	609 State & Zip	

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

Daytime Telephone number

The name of the corporation shall be: Communication Solution	tions of lampastne,
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is: 816 Pampa, 33	•
ARTICLE III PURPOSE	607
The purpose for which the corporation is organized is:	direless Communication
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Sales of V Devices g and Appropriate Training In the Use	e of the Equipment.
ARTICLE IV SHARES The number of shares of stock is: 100 Shares,	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Daniel R. Leforn, Amy H. Leforn, William M. Leforn,	President Vice President Treasurer
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the regi	stered agent is:
Daniel R. Lerom 816 Poinsettia Drive Tampa, FL 33609	→ ~`
ARTICLE VII 'INCORPORATOR	ASSET
The name and address of the Incorporator is: Daniel R. Leforn 816 Poinsettia Drive Tampa., FL 33609	SECRETARY OF STATE ALLAHASSEE, FLORIDA

Daniel R. Leron	9/26/10
Signature/Registered Agent Daniel R. Lecom	Date
Daniel R. Ferm	9/26/10
	Date
Signature/Incorporator Daniel R. Lerom	

ARTICLES OF INCORPORATION

NAME

ARTICLE I

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)