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COVER LETTER

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

SUBJECT: LYNXX INC.				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
	.1	A - A - A - A - C		
Enclosed are an original and one (1) copy of the artic	cles of incorporation an	ad a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
	ADDITIONAL C	OPY REQUIRED		
FROM: LYNETTE CAMPBELL				
Name (Printed or typed)				
35008 EMERALD COAST PKWY SUITE 203 异 五				
Address				
DESTIN, FL 32541				
DESTIN, FL 32541 City, State & Zip				
850-830-8883		On A	<u>م</u>	
Daytime Telephone number				
Iynxxinc@hotmail.com E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)				

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be:	Pice Harris
PRINCIPAL OFFICE Principal street address 35008 EMERALD COAST PKWY SUITE 203 DESTIN, FL 32541	Mailing address, if different is:
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Professional Services	
ARTICLE IV SHARES The number of shares of stock is: 1000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR	s
Name and Title: LYNETTE CAMPBELL PRESIDENT Address: 35008 EMERALD COAST PKWY SUITE 203 DESTIN, FL 32541	Name and Title:Address:
Name and Title: Address:	
Name and Title: Address:	Name and Title: Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of Name: LYNETTE CAMPBELL	the registered agent is:
Address: 35008 EMERALD COAST PKWY SUITE 2 DESTIN, FL 32541	03 -
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Name: LYNETTE CAMPBELL Address: 35008 EMFRALD COAST PKWY SUITE 20 DESTIN, FL 32541	- 3 -
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as registered Agent Required Signature/Registered Agent	
I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felony Required Signature/Incorporator	
- / Required Signature incorporator) Dugo