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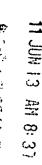
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COVER LETTER

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

SUBJECT: Blue Squid Solutions, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)					
(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 & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
FROM: <u>Christine Kesselring</u> Name 3956 Town Center Blvo	(Printed or typed) 1. Suite 490 ddress				
Orlando, FL 32837	State & Zip				
407-944-3660 Daytime Te	elephone number				
coco1214@cfl.rr.com E-mail address: (to be used	for future annual report	notification)			

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

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

ARTICLE I The name of the	NAME Blue Squid Solutions, In corporation shall be:	c.			
ARTICLE II	PRINCIPAL OFFICE				
	Principal street address		Mailing address, if different is:		
	3261 Hawk's Nest Dr.		enter Blvd.		-
	Kissimmee, FL 34741	Orlando, FL 3	2837		-
ARTICLE III	PURPOSE				•
The purpose for	which the corporation is organized is:				
Any and all	lawful business.				
ARTICLE IV The number of si	SHARES nares of stock is: 1,000				
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTOR	<u>s</u>			
	Title: Christine Kesselring, P. S	_ Name and Title:			-
Address:	3261 Hawk's Nest Dr.	_ Address:			-
	Kissimmee, FL 34741				•
	· · · · · · · · · · · · · · · · · · ·				-
Name and	Title: Darrin Whipple, VP, T 3261 Hawk's Nest Dr.	Name and Title:			
Address:	3261 Hawk's Nest Dr.	_ Address:			
	Kissimmee, FL 34741			•	
	Title:	Name and Title:			
Address:					-
			7:14	مسد مند	•
400001010			1 mg	MUL	
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the mediatemed execution	200		4
Name:	Christine Kesselring	uic registered agent is:		$\overline{\omega}$	
Address:	3261 Hawk's Nest Dr.		in the second		www.pki.co
***************************************	Kissimmee, FL 34741	-			
	•	_	المراجع	ငှာ	
	<u>INCORPORATOR</u>		10 3 3 3	ယ	
	ddress of the Incorporator is:		2012		
Name:	Christine Kesselring	-	•		
Address:	3261 Hawk's Nest Dr. Kissimmee, FL 34741	- -			
Having been na this certificate, I	med as registered agent to accept service of process am familiar with and accept the appointment as regi	s for the above stated corpo istered agent and agree to a	ration at the place des ct in this capacity	ignated	in
C	hristine Kosselwa		June 8, 2011		
	Required Signature/Registered Agent		Date		
	cument and affirm that the facts stated herein are Department of State constitutes a third degree felony			iitted in	a
\cap	1 1 1 N)		_	
	hustines dessolves	7	June 8, 201	<u> </u>	
<u> </u>	 Kemitea Sionanita/Incorporator 		1 late		