

P110000055999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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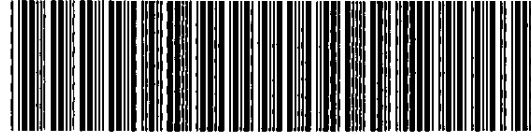
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC
6-15-11

COVER LETTER

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

SUBJECT: GENUSi Corporation

(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: James Reginald Harris, Jr.

Name (Printed or typed)

PO Box 89

Address

Leland, MI 49654

City, State & Zip

(231) 313-6764

Daytime Telephone number

jimi@genusi.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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TALLAHASSEE, FL 32314

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: **GENUSi Corporation**

ARTICLE II PRINCIPAL OFFICE

Principal street address
4185 S. Fairway Drive
Cedar, MI 49621

Mailing address, if different is:

Genusi Corporation, In Care of
James Reginald Harris, Jr., CEO
PO Box 89 Leland, MI 49654

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

("Structured-Cloud")(c) INTERNET SERVICES, BILLING and SYSTEMS

ARTICLE IV SHARES

The number of shares of stock is **250,000,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **James Reginald Harris, Jr., CEO**
Address: **PO Box 89**
Leland, MI 49654

Name and Title: _____
Address: _____

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 the registered agent is:

Name: **NRAI Services**
Address: **515 East Park Avenue**
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **James Reginald Harris, Jr.**
Address: **PO Box 89**
Leland, MI 49654

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TALLAHASSEE FL 32301
SECRETARY OF STATE

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

Wendy D Rea, Assistant Secretary



Required Signature/Registered Agent

6/3/2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

6/10/2011
Date