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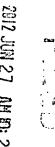
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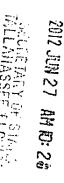
Department of State Divisions of Corporations P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: TRUE BUSINESS SOLUTIONS, INC.

Enclosed is an original and one (1) copy of the articles of incorporation and our check for \$78.75

FROM: KELLY KUKACKA 8357 81ST TERRACE

LARGO, FL 33777



ARTICLES OF INCORPORATION

TRUE BUSINESS SOLUTIONS, INC.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural persons(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

The name of the corporation is:

TRUE BUSINESS SOLUTIONS, INC.

ARTICLES II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLES III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLES IV - CAPITAL STOCK

The corporation is authorized to issue one hundred shares (100) of one Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal of	office, if known, or the mailing address of the corporation is:		2012
NAME	KELLY KUKACKA		2
ADDRESS	8357 81 ST TERRACE	788 N	JUH 27
CITY	LARGO, FL 33777	19	<u> </u>
The name and	street address of the Initial Registered Agent of this Corporation is:		®: 28
<u>N</u> AME	KELLY KUKACKA		
ADDRESS	8357 81 ST TERRACE		
CITY	LARGO, FL 33777		

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the by-laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	KELLY KUKACKA				
ADDRESS	8357 81 ST TERRACE		,		
CITY	LARGO	STATE	FL	ZIP	33777
NAME		······································			
ADDRESS					
CITY		STATE		ZIP	
NAME					
ADDRESS					WALL WATER TO THE TOTAL TO THE
CITY		· STATE		ZIP	
	ARTICLE VII	- INCORPORATI	ONS		
The name(s) as follows:	nd addresses of the incorpor	rators signing these	Articles of	of Incorp	oration are as
	nd addresses of the incorpor			·	
follows:	·				
follows:	KELLY KUKACKA				
follows: NAME ADDRESS	KELLY KUKACKA 8357 81 ST TERRACE	STATE			
follows: NAME ADDRESS CITY	KELLY KUKACKA 8357 81 ST TERRACE LARGO	STATE			
follows: NAME ADDRESS CITY NAME ADDRESS	KELLY KUKACKA 8357 81 ST TERRACE LARGO	STATE			
follows: NAME ADDRESS CITY NAME ADDRESS	KELLY KUKACKA 8357 81 ST TERRACE LARGO	STATE		ZIP	
follows: NAME ADDRESS CITY NAME ADDRESS CITY	KELLY KUKACKA 8357 81 ST TERRACE LARGO	STATE		ZIP	

CERTIFICATE AND ACKNOWLEDGMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

TRUE BUSINESS SOLUTIONS, INC.	
(name of corporation)	

ruisuant to	riorida statutes sections 48.091 and 607.0501, the following	is submitted: 1 ii
above corpor	pration, desiring to organize under the laws of the State	of Florida with it
	ffice as indicated in the Articles of Corporation	
at	8357 81 ST TERRACE	
	LARGO, FL 33777	
has named	KELLY KUKACKA	

located at the aforesaid address, as its Registered Agent, to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

Kely M. K. (registered agent)

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this 22 day of _______, 20/______ STATE OF FLORIDA COUNTY OF FLORIDA before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that executed these Articles of Incorporation. IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 22 day of June, 20/2 (Notary Public, State of Florida at Large) __(Notary Seal) ZVINAIYE MBEWE Notary Public, State of Florida My Commission expires: Sept 8 20/2 Commission# DD820932 My comm. expires Sept. 8, 2012

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