P1300005104

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Office Use Only				



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13 JAN 14 PM 4: 05 SECRETARY OF STATE

COVER LETTER

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

SUBJECT: Bai	nyan IT Solution		
-	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d 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 CO	DPY REQUIRED
FROM: D	avid Slachter		
	Nam	e (Printed or typed)	_
19	901 W. Cypress	Creek Road, 3	3rd Floor
		Address	
F	ort Lauderdale, F	Florida 33309	
	City,	, State & Zip	
9	54-453-5223		
	Daytime 7	Felenhone number	

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

E-mail address: (to be used for future annual report notification)

marshall.watson@marshallwatson.com

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

ARTICLE I

The name of the	e corporation shall be: Banyan IT S	olutions, mc.	
ARTICLE II	PRINCIPAL OFFICE		
	Principal <u>street</u> address 1800 N.W. 49th Street, Suite 120	Mailing a	address, if different is:
	Fort Lauderdale, Florida 33309		
ARTICLE III	PURPOSE		
	which the corporation is organized is:		7s -
			3
To conduct a	any business authorized by Florida lav	v and/or Federal law.	FILED JAN IL PM CRETARY OF
ARTICLE IV	SHARES		
The number of s	shares of stock is: 1000		
			를 8
ARTICLE V			• '
Name and Address:	Title: Marshall C. Watson, CEO 1800 N.W. 19th Street, Suite 120	Name and Title: Address:	
Address:	Fort Lauderdale, Florida 33309	Address:	
Name and	Title:	Name and Title:	
Address:		Address:	
Name and Address:	Title:		
Address.			
ARTICLE VI			
The <u>name and I</u> Name:	Florida street address (P.O. Box NOT acception Marshall C. Watson	otable) of the registered agent is:	
Address:	1800 N.W. 49th Street, Suite 120		
Address,	Fort Lauderdale, Florida 33309		
ARTICLE VII	INCORPORATOR		
	address of the Incorporator is:		
Name:	Marshall C. Watson		
Address:	1800 N.W. 49th Street, Suite 120		
	Fort Lauderdale, Florida 33309		
Having been no this certificate,	amed as registered agent to accept service of I am familiar with and accept the appointme	f process for the above stated corporate to find the first as registered agent and agree to	oration at the place designated is
	11		IIII/a
	Required Signature/Registered Ag	gent	Date
	ocument and affirm that the facts stated he	rein are true. I am aware that the	false information submitted in
tocument to the	Pepartment of State constitutes a third degi	ree Jetony as provided for in s.817.	155, F.S.
	(-1)		1/11/13
	Required Signature/Incorporate	or	Date