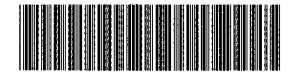
P13000061125

(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: Svidhax gave anthoxizadion to add I Share to application dec 7/23

Office Use Only



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FILLED

13 JUL 22 PM 2: 45

15 JUL 27 PM STAN

COVER LETTER.

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

SUBJECT: SAI SUPER SOFTWARE SOLUTIONS INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original \$70.00 Filing Fee	inal and one (1) copy of the ar \$78.75 \times Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: Sridhar Rangaswamy			13 JUL 5. 5. 4 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
52	22 PH		
0	rlando, Fl 32810	Address , State & Zip	2: 45 514TE LORIDA

Daytime Telephone number

sridhar.rangaswamy@gmail.com /

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

4073107933

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

Divisions of Corporation

Attention: New filing Section

P.O. Box 6327

Tallahassee

FI 32314

Respected Sir/Madam,

I am the OWNER OF SAI SUPER SOFTWARE solutions Inc –owner and Document # P 12000035260.

I voluntarily dissolved the corporation as OWNEER

I wanted to FILE THE NEW Corporation with the SAME NAME

SAI SUPER SOFTWARE Solutions Inc

Thanks & Best Regards

R. Idla

(Sridhar Rangaswamy)

JULY 16'2013

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

ARTICLE I NAM The name of the corporat	E SAI SUPER SOF	TWARE S	OLUTIONS INC
ARTICLE II PRINCIPAL OFFICE			
Principal <u>street</u> address 5230 Cona Reef court			Mailing address, if different is:
Orlando ·			
FI 32810-4075	5		
Software Deve	ne corporation is organized is:		
Mobile Apps D		4 Ala:t4.	
	Development, Design and		ure □ □ □ □
	ent, Development and Ar		= = = = = = = = = = = = = = = = = = = =
Create a Mod	lel like an University/Educ	cational pu	rpose Sy 2 E
Export			TA PH D
ARTICLE IV SHA The number of shares		 RS	2: 45 STATE FLORIDA
Name and Title	Sridhar Rangaswamy CEC	Name and Title	Anirudh Sridhar
Address	5230 CONA REEF CT	_ Address:	5230 CONA REEF CT
	Orlando	_	Orlando
	FI	_	FI 32810
Name and Title:	Shikha Sridhar	_ Name and Title	:
Address	5230 CONA REEF CT	Address:	
	Orlando		
	FI 32810	_	
Name and Title:		_ Name and Title	:
Address		Address:	
		_	

Name a	and Title:	Name and Title:
Addre	ss	Address:
ARTICLE VI The name and	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	Sridhar Rangaswamy	
Address:	5230 Cona Reef court	_
	Orlando, Fl 32810	_ 1
ARTICLE VI	I INCORPORATOR	FILED 3 JUL 22 PH 2: 45 ATTAILESSEE FLORIDA
The <u>name and</u>	address of the Incorporator is:	2 B
Name:	Sridhar Rangaswamy	_ ST 2:
Address:	5230 Cona Reef court	_ 5
	Orlando FI 32810	_
	amed as registered agent to accept service of proce I am familiar with and accept the appointment as r	ss for the above stated corporation at the place designated egistered agent and agree to act in this capacity
	R. Cdia	07/16/2013
	Required Signature/Registered Agent	Date
	ocument and affirm that the facts stated herein a e Department of State constitutes a third degree fel	e true. I am aware that the false information submitted in ony as provided for in s.817.155, F.S.
·	R. Solle	07/16/2013
	Required Signature/Incorporator	Date