

P13000092894

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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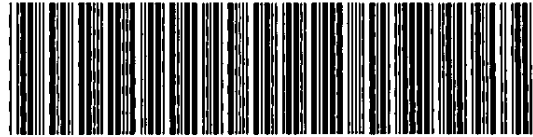
(Business Entity Name)

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TALLAHASSEE, FL 32314

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SUBJECT: **ORION SYSTEMS INTEGRATION, INC.**
(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: **OLIVEROS, FRANKLIN R**

Name (Printed or typed)

1601 N. PALM AVENUE, SUITE 206

Address

PEMBROKE PINES, FL 33026

City, State & Zip

954-812-9166

Daytime Telephone number

FRANK@OSI-NETWORKS.COM

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

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

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: ORION SYSTEMS INTEGRATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1601 N. PALM AVENUE, SUITE 206
PEMBROKE PINES, FL 33026

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: OLIVEROS, FRANKLIN R

Name and Title: _____

Address 1601 N. PALM AVENUE, SUITE 206
PEMBROKE PINES, FL 33026

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE FL 32310

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: OLIVEROS, FRANKLIN R
Address: 1601 N. PALM AVENUE, SUITE 206
PEMBROKE PINES, FL 33026

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:


Name: OLIVEROS, FRANKLIN R
Address: 1601 N. PALM AVENUE, SUITE 206
PEMBROKE PINES, FL 33026

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TALLAHASSEE, FL 32399

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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


Required Signature/Registered Agent

11/12/13
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

11/12/13
Date

**ORION SYSTEMS INTEGRATION, INC.
1601 N. PALM AVENUE
SUITE 206
PEMBROKE PINES, FL 33026**

October 24, 2013

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

I incorporated my business online as a corporation under the name **ORION SYSTEMS INTEGRATION, INC.**

I did not receive any notification for annual reports for 2013.

I have no intention of reinstating the old corporation filed under number P12000096377.

I am attaching the new Articles of Incorporation effectively immediately, along with a check for \$70.00

Should you have any questions, please do not hesitate to contact me.

Sincerely,

Franklin R. Oliveros