

From:

P160000036903

04/26/2003

#395 P.001/003

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800) 221-2972
Fax Number : (888) 692-9256

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
B SOFT INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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From:

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#399 P.002/003

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: B Soft Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

6001 Palm Place LN Apt. 121

6001 Palm Place LN Apt. 121

Tampa FL 33647

Tampa FL 33647

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any lawful act or activity for
which corporations may be organized.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nooruldeen Alsai/President

Name and Title: _____

Address 6001 Palm Place LN Apt. 121

Address: _____

Tampa FL 33647

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

From:

04/26/2016 12:54

#399 P.003/003

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: Nooruldeen Alsaif
Address: 6001 Palm Place LN Apt. 121
Tampa FL 33647

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nooruldeen Alsaif
Address: 6001 Palm Place LN Apt. 121
Tampa FL 33647

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

4/26/2016
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

4/26/2016
Date