∾F•rom:

## 60000405

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000115659 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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 THE QUASAR TECHNOLOGY GROUP, INC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

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

CLE II PRINC			•
7 Wattle Tree Ct	Principal street address	Mailing address, 11737 Wattle Tree Ct.	if different is:
737 Wattle Tree Ct.		Jacksonville, FL 32246	<u> </u>
		300,000,77110,70 322-70	<del></del>
	· · ·	**************************************	
CLE III PURPO urpose for which the	PSE to engle	age in any lawful act or activity for	
corporations may	be organized.		
			,
ICLE IV SHARE number of shares of ICLE V INITIA	ES 1,000 stock is: LOFFICERS AND/OR DIRECTOR		·
number of shares of ICLE V INITIA Name and Title	L OFFICERS AND/OR DIRECTOR  Marcel Del Toro/ President  11737 Wattle Tree Ct.	S Name and Title:	
number of shares of	L OFFICERS AND/OR DIRECTOR  Marcel Del Toro/ President  11737 Wattle Tree Ct.	7.7.	
number of shares of ICLE V INITIA Name and Title	L OFFICERS AND/OR DIRECTOR Marcel Del Toro/ President 11737 Wattle Tree Ct.	S Name and Title:	
number of shares of ICLE V INITIA Name and Title Address	L OFFICERS AND/OR DIRECTOR Marcel Del Toro/ President 11737 Wattle Tree Ct. Jacksonville, FL 32246	Name and Title:  Address:	
Name and Title:	L OFFICERS AND/OR DIRECTOR  Marcel Del Toro/ President  11737 Wattle Tree Ct.  Jacksonville, FL 32246	Name and Title:	
number of shares of ICLE V INITIA Name and Title Address	L OFFICERS AND/OR DIRECTOR Marcel Del Toro/ President 11737 Wattle Tree Ct. Jacksonville, FL 32246	Name and Title:	
Name and Title:	L OFFICERS AND/OR DIRECTOR  Marcel Del Toro/ President  11737 Wattle Tree Ct.  Jacksonville, FL 32246	Name and Title:	
Name and Title:	L OFFICERS AND/OR DIRECTOR  Marcel Del Toro/ President  11737 Wattle Tree Ct.  Jacksonville, FL 32246	Name and Title:	
Name and Title  Name and Title  Address	Marcel Del Toro/ President  11737 Wattle Tree Ct.  Jacksonville, FL 32246	Name and Title:  Address:  Name and Title:  Address:	
Name and Title  Name and Title  Address	L OFFICERS AND/OR DIRECTOR Marcel Del Toro/ President  11737 Wattle Tree Ct.  Jacksonville, FL 32246	Name and Title:	
Name and Title  Name and Title  Address	Marcel Del Toro/ President  11737 Wattle Tree Ct.  Jacksonville, FL 32246	Name and Title:	SECR.
Name and Title:  Address  Name and Title:	L OFFICERS AND/OR DIRECTOR Marcel Del Toro/ President  11737 Wattle Tree Ct.  Jacksonville, FL 32246	Name and Title:	

THE PROPERTY OF THE PROPERTY O

Nume a	and Title:	Name and Title:	
Addres	SS	Address:	
	REGISTERED AGENT Plorida street address (P.O. Box NOT acce	neible) nýtha maiceamh cuann in	
Name:	Marcel Del Toro	Mane) of the to Protection officer 12"	
Address:	11737 Wattle Tree Ct.		
	Jacksonville, FL 32246		
ARTICLE VII	INCORPORATOR	,	
The <u>name and</u>	address of the Incorporator is:		
Name:	Marcel Del Toro		
Address:	11737 Wattle Tree Ct.		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Jacksonville, FL 32246	And the second s	
Effective date, i (If an effective days after the i <u>Note:</u> If the da the document's	date is tisted, the date must be specific an filing.) to inserted in this block does not meet the an effective date on the Department of State's		þ¢ tisled.ns
Having been no this certificate	imed as registered agent to accept service of I am familiar with and accept the appointme	f process for the above stated corporation at the place of our as registered agent and agree to act in this capacity	lesignated in
1 1	USE	10/1</td <td>(ω</td>	(ω
	Required Signature/Registered A	geni Date	
( submit this de document to the	ocument and affirm that the facts stated he Department of State constitutes a third deg	rein are true. I am aware that the fulse information su ree felony as provided for in \$8.17.153, E.S.	
Hey'	bired Signature/Incorporator	Dan	ie zna
			113 )
			<u>8</u>
			ĐΞ