## P20000098765

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PICK-UP WAIT MAIL				
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(Document Number)				
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## **COVER LETTER**

FIL 21,

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

SUBJECT:	JJ ROBE ( PROPOSED CORPORA)	275 INTE	ENATIONAL I		
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	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM:	FROM: John Roberts  Name (Printed or typed)  ROY ATH AME. SW				
Address  Address  Address  City/State & Zip					
	Daytime Tel	560-89 lephone number	ational.com		

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)

The name of the corporation shall be: JJ Robert	S INTERNATIONADO II NO.
Principal street address  Principal street address	Mailing address, if different is:
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  SOFTWARE	PALES OF EDUCATIONAL
The number of shares of stock is:  ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	
Name and Title: John ROBERTS  Address 9049+1+ Ave S  Largo, FL 3'	Address:
Name and Title:Address	
	Name and Title:  Address:

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of Name:  Sohn J Roberts  Address:  Address:  LARGO FL 3377	The registered agent is:
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:  Name:  Address:  Add	70
Effective date, if other than the date of filing: AND (If an effective date is listed, the date must be specific and cannot filing.)	be more than five days prior or 90 days after the
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	tatutory filing requirements, this date will not be listed as
Having been named as registered agent to accept service of process f this certificate. I am familiar with and accept the appointment as registered. I am familiar with and accept the appointment as registered. Required Signature/Registered Agent  I submit this document and affirm that the facts stated herein are tredocument to the Department of State constitutes a third degree felony.  Required Signature/Incorporator	Date  Lam aware that the false information submitted in a