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SECRETARY OF STATE
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## FILE

## **COVER LETTER**

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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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

612-810-3906

patm@usinternet.com

SUBJECT: Sunt	ish Systems Incorporated					
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)						
Enclosed are an o	original and one (1) copy of the a	rticles of incorporation and	I a check for:			
■ \$70.0 Filing Fe		\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status			
FROM:	Patrick Moran					
Name (Printed or typed) 14423 Manchester Drive						
						Address
	Naples, FL, 34114					
City, State & Zip						

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

Davtime Telephone number

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

## ARTICLES OF INCORPORATION

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

•	Sunfish Systems Incorp		· <del>-</del>	
<u>ARTICLE II PRINC</u>			fress, if different is:	
14423 Manchester Driv	ve. Naples, Fl. 34114	7901 4th St N STE	7901 4th St N STE 300 St. Petersburg, Florida, 33702	
		St. Petersburg, Flori		
ADTICLE HE DEED		mation Technologies Services.		
			22 FEB	
ARTICLE IV SHAR The number of shares o	RES 100000 f stock is:		Nak Ot Sivie	
ARTICLE V INITI	AL OFFICERS AND/OR DIRECTO	PRS	: : : : : : : : : : : : : : : : : : : :	
	AL OFFICERS AND/OR DIRECTO Patrick Moran, CEO le:		••	
ARTICLE V INITI  Name and Tit  Address	Patrick Moran, CEO	Name and Title:	••	
Name and Tit	le:	Name and Title:		
Name and Tit	le: Patrick Moran, CEO 14423 Manchester Drive	Name and Title:		

Name a	and Title:	Name and Title;	
Addre	ss	Address:	
			· · ·
APTICLE VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT accept	able) of the registered agent is:	
Name:	Registered Agents Inc.		
Address:	7901 4th St N STE 300		
	St. Petersburg, FL 33702		√. γγ. γ.
			Z2 FF SECR ALLIA
<u>ARTICLE VII</u>	INCORPORATOR		FEB II
The name and	address of the Incorporator is:		See In
Name:	Patrick Moran		
Address:	14423 Manchester Drive		TEB 11 AH 4: 12 REINBY OF SINIE AHASSEE, I I OBIO
	Naples, Fl. 34114		.÷. 10
Effective date.	I EFFECTIVE DATE: if other than the date of filing: date is listed, the date must be specific and	. (OPTION I cannot be more than five day	AL) es prior or 90 days after the
Note: If the dathe document's	ite inserted in this block does not meet the app is effective date on the Department of State's re	olicable statutory filing requiremeeords.	nents, this date will not be listed as
Having been n this certificate,	amed as registered agent to accept service of I am familiar with and accept the appointmen	process for the above stated contact as registered agent and agree	rporation at the place designated in to act in this capacity
Bu	2 Have		02/08/2022
	Required Signature/Registered Ag	ent	Date
I submit this d document to th	locument and affirm that the facts stated her be Department of State constitutes a third degr	ein are true. I am aware that t ee felony as provided for in s.81	he false information submitted in a 7.155, F.S.
$Q_{\alpha}$			02/08/2022
Rec	quired Signature/Incorporator	<del>_</del>	Date