# P95000056640

#### TRANSMITTAL LETTER

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

(407) 568-1209

SUBJECT	: Objix Management Systems, Inc.
Enclosed is check for	s an original and one (1) copy of the articles of incorporation and a \$122.50
FROM:	Roger Kevin Cole and Roxanne Brown
	20328 Macon Parkway
	Orlando, FL 32833

FILED

5 JUL 20 MH II: 46

CAHASSEE, FLORID

1/3/9X

## ARTICLES OF INCORPORATION

**OF** 

· · · · · · · · · · · · · · · · · · ·
Objix Management Systems, Inc.
— The undersigued incorporatoris), for the purpose of forming a corporation under the Florida hMDagsy
Corporation Act, hereby adopt(s) the following Articles of Incorporation.  ARTICLE I NAME  Output  Description:
The name of the corporation shall be:
Objix Management Systems, Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
Objix Management Systems, Inc.
20328 Macon Parkway
Orlando, FL 32833
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
100 shares.
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:
Roger Kevin Cole
20328 Macon Parkway
Onlanda E1 22022

### ARTICLE V INCORPORATOR(S)

Roger Keyin Cole	
20328 Macon Parkway	
Orlando, FL 32833	
Roxanne Brown	
20328 Macon Parkway	
Orlando, F1, 32833	
r(s) has (have) executed these Articles of Incorporation th	iis
	nis
	iis

Signature

95 JUL 20 AN II: 47
TALLAHASSEE, FLORIDA

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.6501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Objix Management Systems, Inc.

	Color Color Land Color Color	
2. The name and addre	ess of the registered agent and office is:	
	Roger Kevin Cole	
_	20328 Macon Parkway	_
_	Orlando, FL 32833	<del>-</del>
the place designated in act in this capacity. I fu	registered agent and to accept service of process for the above this certificate. I hereby accept the appointment as registered arther agree to comply with the provisions of all statutes related my duties, and I am familiar with and accept the obligation	dagent and agree to ting to the proper and
Rose Va		

(Signature)