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TRANSMITTAL LETTER

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

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| OUD IEOT | ALDHACOPT LAG |
|--------------------------------|---|
| SUBJECT: | (proposed corporate name) |
| Enclosed plea above corpora | se find an original and one (1) copy of the articles of incorporation for the ation and check in the amount of \$ |
| FROM: | ACKERLEY ASSOCIATES, P.A. Name |
| | Address HARRISON AVE. |
| | CLEARWATER, FL 34616 City, State, & Zip |
| | (813) 461 6222 Telephone Number |

Note: Additional copy of articles is needed only when certified copy is requested.





ARTICLES OF INCORPORATION

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95 SEP 18 PHIZ: 11

ALPHASOFT, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

ALPHASOFT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

822 VILLAGE WAY PALM HARBOR, FL 34683 2938

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 shares common stock

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

STEVEN D. FEJES 822 VILLAGE WAY PALM HARBOR FL 34683

ARTICLE Y INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

STEVEN D. FEJES 812 VILLAGE WAY PALM HARBOR FL 34683

| The undersigned h | as(have) ex | ecuted these . | Articles of Inc | Orporation this |
|-------------------|-------------|----------------|-----------------|-----------------|
| 13+4 | | | | |
| | | Stat | Signature/ | President |
| | | | Signature/ | ritle |
| | | - | Signature/1 | itle |

CERTIFICATE OF DESIGNATION HEGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607,0501, Florida Statutes, the undersigned corporation, organized under the laws of the tate 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: ALPHASOFT INC |
|-------------------------------|---|
| 2. | The name and address of the registered agent and office is: |
| | STEVEN D FEJES |
| | (NAME) |
| | (P.O. BOX NOT ACCEPTABLE) |
| | (F.O. BOX NOT ACCEL TABLE) |
| | PALM HARBOR FL 34683 |
| | (CITY/STATE/ZIP) |
| | SIGNATURE St. D. D. (corporate officer) TITLE Fresichent DATE 9-13-95 |
| PRO THI AN PRO FO | VING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF OCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN IS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT D AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE OVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERRMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT. |
| | SIGNATURE STAD Z |
| | DATE 9-/3-95 |