## P9500073506

TRANSMITTAL LETTER

DECEMPINE

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

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SUBJECT: PRO Solutions Include suffix)  (Proposed corporate name - must include suffix)					
Enclosed is an origina	al and one (1) co	py of the articles of	incorporation a	and a check	
for:   \$70.00   Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required		
FROM: Joseph V. Montoro JR  Name (printed or typed)					
2730.0 US 1 South					
St. Aug., twe FL 32086 City, State & Zip					

1 **EFF** \$EP 2 2 1995

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

Daytime Telephone number

904 797 6600

ARTICLES OF INCORPORATION

335 221 Fre 1:17

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:

PRO Solutions, INC

ARTICLE II PRINCIPAL OFFICE

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

2730-Q US 1 South St. Augustine, FL 32086 (904)797-6600 / 797-LOCK Fax

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Joseph V. Montoro JR

2730-Q US 1 South St. Augustine, FL 32086 (904)797-6600 / 797-LOCK Fax

## ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The nam	ic(s) and stree	et address(es) of t	he incorporator(s)	to these	e Article:	s of Incor	poration i	s(are):
	14.00	1	a			ı		

JOSEPH V Monteriota 9730-Q USI SOUTH St Augustine FI 32026

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20 day of September , 19 9-5.

Signature

Signature

Signature

Signature

NOTF: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE TELESTICS.

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	Par Schutiens Inc
2.	The name and address of the regis	stered agent and office is.
	Joseph V	(NAME)
		(CITY/STATF/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) (DATE)