

P9600004183
TRANSMITTAL LETTER

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

SUBJECT: Cyber Solutions, Inc.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check
for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: Blain Lyle Nelson
Name (printed or typed)

3655 Belle Arbor Circle
Address

Titusville, FL 32780
City, State & Zip

(407) 267-8799
Daytime Telephone number

700001684337
-01/10/96--01067--017
*****78.75 *****78.75

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

JAN 12 1996

TALLAHASSEE, FLORIDA

26 JAN 10 PM 1:22

RECEIVED

ARTICLES OF INCORPORATION

FILED

95 JAN 10 PM 1:22

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:

Cyber Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3655 Belle Arbor Circle
Titusville, FL 32780
(407) 383-4909

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1,000,000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Blain Lyle Nelson
3655 Belle Arbor Circle
Titusville, FL 32780
(407) 267-8799

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Blain Lyle Nelson
3655 Belle Arbor Cr
Titusville, FL 32780

Annette Irene Nelson
3655 Belle Arbor Cr
Titusville, FL 32780

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

1st day of January, 19 96.

Blain L. Nelson

Signature

Annette I. Nelson

Signature

Signature

NOTE: 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**

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: Cyber Solutions, Inc.

2. The name and address of the registered agent and office is:

Blain Lyle Nelson

(NAME)

3655 Belle Arbor Circle

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Titusville, FL 32780

(CITY/STATE/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.

Blain L Nelson

(SIGNATURE)

1/1/96

(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

FILED
26 JUN 10 PM 23
TALLAHASSEE, FLORIDA