(SAMPLE LETTER OF TRANSMITTAL) (SAMPLE LETTER OF TRANSMITTAL) (SAMPLE LETTER OF TRANSMITTAL)

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

Re: Nu Solutions, Inc. , Inc (name of corporation)

Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122,50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Wayne Vallimont

(individual's name)

(individual's name)

Nu Solutions, Inc.

(name of corporation)

1965

MAILING ADDRESS OF COR	PORATION —
10960 Beach Blvd. #4	22
Jacksonville, Florid	a 32246
PHONE —	
(⁹⁰⁴) <u>565-9078</u>	

ARTICLES OF INCORPORATION

of

1	Nu Solutions, Inc	•
tent.	(name of corporation)	
The undersigned subscriber(s) to these Artic corporation under the laws of the State of	les of Incorporation, natural person(s) comp f=Florida.	ctent to contract, hereby form
AR	TICLE I - CORPORATE NAME	
The name of the corporation is:		≨ ₆ 95
Nu Solutions, Inc.		CLARE E
	ARTICLE II - DURATION	23 15.83 15.83 15.83
This corporation shall exist perpetually uni	ess dissolved according to Florida law,	
	ARTICLE III - PURPOSE	1037 - Com
The corporation is organized for the purpose United States and the State of Florida.		rmitted under the faves of the
AR	TICLE IV - CAPITAL STOCK	
The corporation is authorized to issue Two		of One
Dollar(s) (\$ 1.00**) par val	c Common Stock, which shall be designated	ted "Common Shares."
	TIAL REGISTERED OFFICE AND AGE	
The street address of the Initial Registered A	gent office and the name of the Initial Proje	VI Starad Amout at these 2002 - See
NAME Wayne Vallimont	series and the name of the minar Regis	stered Agent at that office is:
ADDRESS 10960 Beach Blvd. #42	2	
cny Jacksonville		
The principal office, if known, or the mailing	P. Adress of the corporation in	ZIP 32246
	22	
CTIY Jacksonville	2.2	
	FLORIDA	ZIP 32246
for the second s	*1* directors initially. The numbe the By-Laws, but shall never be less than poration are as follows:	r of directors may be either one (1). The names and
NAME Wayne Vallimont		
ADDRESS 10960 Beach Blvd. #4	22	
CTIY Jacksonville	STATE	ZIP 32246
VAME		
ADDRESS		
угу	STATE	ZIP
IAME		
DDRESS		
пу	STATE	ZIP
ORM 215: ARTICLES OF INCORPORATION, PAGE 1	PAGE 1	SEMINOLE-MIAMI 012593

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME Wayno Vallimont			
ADDRESS 10960 Boach Blvd. #422			
cny Jacksonvillo	STATE	Florida	ZIP 32246
NAMII			211 32240
ADDRESS	······································		
CITY	SIATE		ZIP
NAMIL			
ADDRESS			
CITY	STATE	······································	Z1P
day of	criber(s) have executed thes	e Articles of Incorp	
	(I) Ora 1	J Shi	
		C. Crucy	(Scal)
1111116 D.A. M. Subsan			(Seal)
MY COMMISSION # COMPTTY'S EXPIRES AMOUNT #, 8000 NOMED THU TROY HAM INSURANCE, INC.	 		(Scal)

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CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT

OF

Nu Solutions, Inc.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607,0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at 10960 Beach blvd. #422

Jacksonville, Florida

32246

has named Wayne Vallimont

located at the aforesaid address, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.