P 9 6 0000 9 0 1 3 9 TRANSMITTAL LETTER

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

300001991003--0 -10/30/96--01101--006 *****78.75 *****78.75 INDUERE 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 : □ \$131.25 Fill \$70.00 **■ \$78.75** \$122.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED J. M. Br. 5500 Name (Printed or typed) Cocon Beach, FL 3.2931
City, State & Zip

FI CHASSEN NOV 3 1996

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

(407) 455-9859 Daytime Telephone number

ARTICLES OF INCORPORATION

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

The name of the corporation shall be:

INDUERE Solutions, INC

ARTICLE II PRINCIPAL OFFICE

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

1980 N. ATLANTIC AVE, SLITE 812 COCOA BEACH, FL 32931

> **ARTICLE III** SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time 10,000

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

> J. M. BRISSON 1980 N. ATLANTIC Ave, STE 812 COCOA BEACH, FL 32931

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

J. M. BRISSON 1980 N. ATLANTIC AVE, STE812 LOCOA BRACH, FL 32931

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

21 day of <u>DeroBER</u>, 19 96.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the

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: INDUERE SOLUTIONS, INC.			
		ZE:		
2.	The name and address of the registered agent and office is:	LAHASS	pcT 30	FIL
	J. M. BRISSON (NAME)	Y OF STATE	NH 9:	Ē
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	RIDA	8	
	COCUA BEACH, FL 3293/			
	de la companya de la			

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) 10/21/96 (DATE)