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Charter Number Only

6/30/97  
PBR  
Requestor's Name  
Address  
City State ZIP Phone

VALIDATION ONLY

FILED  
97 JUL -1 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-07/01/97--01055--007  
\*\*\*\*122.50 \*\*\*\*122.50

CORPORATION(S) NAME

Computer Command corporation



Empire Toll Free: 1-800-432-3028

☒ Profit  
☐ NonProfit  
☐ Amendment  
☐ Merger  
☐ Foreign  
☐ Dissolution  
☐ Mark  
☐ Limited Partnership  
☐ Annual Report  
☐ Other  
☐ Reinstatement  
☐ Reservation  
☐ Change of Registered Agent  
☒ Certified Copy  
☐ Photo Copies  
☐ Certificate Under Seal  
☐ Call When Ready  
☐ Call If Problem  
☐ After 4:30  
☒ Walk In  
☐ Will Wait  
☒ Pick Up  
☐ Mail Out

|                |
|----------------|
| Name           |
| Availability   |
| Document       |
| Examiner       |
| Updater        |
| Verifier       |
| Acknowledgment |
| W.P. Verifier  |

CERTIFIED COPY

RECEIVED  
JUL -1 PM 10:24  
K.R. JUL 01 1997

CR2E031 (R8-85)

## TRANSMITTAL LETTER

FILED  
97 JUL -1 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: COMPUTER COMMAND CORPORATION  
(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:

JOSE OCAMPO

Name (printed or typed)

212 VIA MILAN BLVD

Address

DAVIE FL 33325

City, State & Zip

954 236 4352

Daytime Telephone number

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

## 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 NAME

The name of the corporation shall be:

COMPUTER COMMAND CORPORATION

### ARTICLE II PRINCIPAL OFFICE

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

212 UPA MIKAN TERR  
DAVIE FL 33325

### ARTICLE III SHARES

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

ONE HUNDRED SHARES AT ONE DOLLAR PAR VALUE

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Brian Lynn

TWO SOUTH UNIVERSITY DRIVE SUITE 215  
PLANTATION, FLORIDA 33324

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27 JUL - 1 11:17  
CLERK OF COURT  
DAVIE, FLORIDA

**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):

JOSE G. ECAMPO  
212 VIA MILAN TERR  
DAVIE FLORIDA 33325

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

24 day of June, 1997.

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

Jose G. Ecampo  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**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: COMPUTER COMMAND CORPORATION

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

Brian Lynn  
(NAME)

TWO SOUTH UNIVERSITY DRIVE, SUITE 215  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

PLANTATION FLORIDA 33324  
(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.*

Brian Lynn  
(SIGNATURE)

6/25/97  
(DATE)