

P98000009585

TRANSMITTAL LETTER

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

300002403083--2  
-01/16/98--01066--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: APP ENTERPRISE 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:

ARVIND P. PATIL

Name (printed or typed)

5650 PACIFIC BLVD, # 1121

Address

BOCA RATON, FL 33433

City, State & Zip

(561) 361-8443

Daytime Telephone number

FILED  
98 JAN 30 AM 10:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

*Handwritten signature*  
1/20/98



**FLORIDA DEPARTMENT OF STATE**

**Sandra B. Mortham**  
Secretary of State

January 20, 1998

ARVIND P. PATIL  
5650 PACIFIC BLVD  
#1121  
BOCA RATON, FL 33433

SUBJECT: APP ENTERPRISE SOLUTIONS INC.  
Ref. Number: W98000001233

We have received your document for APP ENTERPRISE SOLUTIONS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6933.

Dana Calloway  
Document Specialist

Letter Number: 798A00002825

## 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:

APP ENTERPRISE SOLUTIONS INC.

FILED  
JUN 30 AM 10:57  
98  
TALLAHASSEE, FLORIDA  
STATE

### ARTICLE II PRINCIPAL OFFICE

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

5650 PACIFIC BLVD, # 1121  
BOCA RATON, FL 33433

### ARTICLE III SHARES

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

~~250,000~~

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MR. ARVIND P. PATIL  
5650 PACIFIC BLVD, # 1121  
BOCA RATON, FL 33433

**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):

MR. ARVIND P. PATIL  
5650 PACIFIC BLVD, #1121  
BOCA RATON, FL 33433

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

14<sup>th</sup> day of JANUARY, 19 98.

Appatil

Signature

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:

APP ENTERPRISE SOLUTIONS, INC

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

ARYIND P. PATIL  
(NAME)

5650 PACIFIC BLVD, # 1121  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BOCA RATON, FL 33433  
(CITY/STATE/ZIP)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

APPatil.

(SIGNATURE)

1/14/98

(DATE)