

CORPORATION(S) NAME

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## TRANSMITTAL LETTER

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

· (Proj	posed corporate ne	and most most		
for: \$70.00 [	and one (1) cor \$78.75 Filing Fee	by of the articles of \$122.50	incorporation and a check state of the state	
Filing Fee	& Certificate	& Certified Copy  Additional Copy	Certified Copy & Certificate	
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FROM:		Jaxon (printed or typed)		
1820 Sweetwater West Circle				

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

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 NAME

The name of the corporation shall be:

Jaxon Software Consulting Finc.

ARTICLE II PRINCIPAL OFFICE

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

1820 Sweetwater West Circle Apopka, FL 32712

ARTICLE III SHARES

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

100 shares at \$1.00 par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Kevin Jaxon 1820 Sweetwater West Circle apopka, FL 32712

## 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):

Kevin Jaxon 1820 Sweetwater West Circle apopka, FL 32712

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:	Jaxon Software	Consulting In
2. The name and address of the reg		
<u>Kevi</u>	n Jaxon (NAME)	98 MAY 2: SECRETAR ALLAHAS:
1820 Su (P.O.)	Deetwater West Circ Box or Mail Drop Box NOT ACCEPTABLE)	27 MI
apopt	(a) FL 32712 (CITY/STATE/ZIP)	) 11:02 STATE JORIDA

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.

Thun Jum May 19, 1998
(SIGNATURE) (DATE)