# PROMES, 18 52 76

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

Re: Fusion Works, Inc.

500002554085-- S -06/10/98--01013--013 \*\*\*\*122.50 \*\*\*\*122.50

# Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

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

Very truly yours,

Daniel W. Beers

Fusion Works P.O. Box 1865 Ormond Beach, FL 32175

(904) 304-7096

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# ARTICLES OF INCORPORATION

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of
Fusion Works, Inc.
(name of corporation)
The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.
ARTICLE I - CORPORATE NAME
The name of the corporation is:
Fusion Works, Inc.
ARTICLE II - DURATION
This corporation shall exist perpetually unless dissolved according to Florida law.
ARTICLE III - PURPOSE
The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.
ARTICLE IV - CAPITAL STOCK
The corporation is authorized to issue <u>Five hundred</u> shares (500) of <u>One</u>
Dollar(s) (\$ 4,00 par value Common Stock, which shall be designated "Common Shares."
ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT
The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:
NAME Daniel W. Beers
ADDRESS 6071 Winding Ridge Lane  STY Part Change Florida FL ZIP 32124
The principal office, if known, or the mailing adress of the corporation is:
NAME FUSION Works
ADDRESS $P, O, Box 1865$
CITY OFMOND Beach FLORIDA FL ZIP 32175
ARTICLE VI - INITIAL BOARD OF DIRECTORS
This corporation shall have \(\frac{1}{12}\) ree (\frac{3}{2}\) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:
NAME Joseph C. Beers
ADDRESS 704 IRVING BLUFF RD
CITY SHRENEFORT STATE LA ZIP 71107
NAME Danny C. Brannon
ADDRESS 45 Blaune Dr.
CITY Palm Coast STATE FL ZIP 32 137
NAME Daniel W. Beers
ADDRESS 6021 Winding Ridge Lane
CITY Port Orange STATE FL ZIP.3Z1Z4
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# ARTICLE VII - INCORPORATORS

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

AME Joseph C. Beers	S	
DRESS 704 IRVING BL	uff RD	
Y SHREVEPORT	STATE LA	ZIP 71107
ME Danny C. Brann	ion	
DRESS 45 Blaine Dr		
ry Palm Coast	STATE FL	ZIP 32137
ME Daniel W. Beers	S	
DRESS 6021 Winding	Ridge Lane	
TY Port Orange	state FL	<u> zir ろみみり</u>
y of <u>June</u> , 19 <u>98</u> .	Joseph C Bour De Branco DW for	(Seal)
TATE OF FLORIDA	) ss	
COUNTY OF		
	ake acknowledgments in the State and County se	et forth above, personally
before me, a Notary Public authorized to ta appeared:  Signature	Form of Identific	ation
appeared:		
appeared: Signature	Form of Identific	ation
Signature  Signature  Signature  known to me and known to be the person(s) when the thatexecuted these Articles are the person as indicated opposite each necessarily and the person as indicated opposite each necessarily are the person as indicated opposite.	Form of Identific  Form of Identific  Form of Identific  Porm of Identific  an executed the foregoing Articles of Incorporation, cles of Incorporation, that I relied upon the form of mame, and that an oath (was)(was not) taken.	ation ation who acknowledged before identification of the above
Signature  Signature  Signature  Signature  known to me and known to be the person(s) who	Form of Identific  Form of Identific  Form of Identific  po executed the foregoing Articles of Incorporation, cles of Incorporation, that I relied upon the form of	ation ation who acknowledged before identification of the above unty and State last aforesaid
Signature  Signature  Signature  Signature  cnown to me and known to be the person(s) whene thatexecuted these Articles are as indicated opposite each neared person as indicated opposite each neared.	Form of Identific  Form of Identific  Form of Identific  Form of Identific  The second of Incorporation, and I relied upon the form of Identific that I relied upon the Identification that I relied upon the Identifica	ation ation who acknowledged before identification of the above unty and State last aforesaid

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### CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

### CERTIFICATE OF REGISTERED AGENT

**OF** 

Fusion Works, Inc.	
(name of corporation)	f

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 SOM OF THE PARTY O its registered office as indicated in the Articles of Incorporation Port Orange, FL. 32124

has named Daniel W. Beers

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.