# PHESSONITTAL LETTER Department of State TRANSMITTAL LETTER Department of State

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

000002611710--1 -08/10/98--01067--002 \*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: NE	EW MILLENNIUM SOFTWARE CORPORATION			
-	(Proposed co	orporate name - must include	suffix)	
Enclosed is an original	and one(1) copy of the article	es 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 COI	PY REQUIRED	
FROM: _	PABLO A. VALLEJO Name (Pr	inted or typed)		<b>-</b>
	4502 TWIN CREST WAY			
-	Address			NG.
-	TAMPA FL, 33624  City, State & Zip			98 AU
-	City, State & Zip  813 960 2847  Daytime Telephone number		OF CORPO	
	Daytime Te	elepnone number		OF STATE OR ORPORATIONS

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

8/1/25

# ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

## <u>ARTICLE I NAME</u>

The name of the corporation shall be:

NEW MILLENNIUM SOFTWARE CORPORATION

## ARTICLE II PRINCIPAL OFFICE

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

4502 TWIN CREST WAY, TAMPA FL, 33624

## ARTICLE III SHARES

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

10

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

PABLO A. VALLEJO, 4502 TWIN CREST WAY, TAMPA FL 33624

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

PABLO A. VALLEJO, 4502 TWIN CREST WAY, TAMPA FL 33624

Signature/Incorporator Bate

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

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

Fally Signature/Registered Agent 8-3-1998

Date