

P98000076626

TRANSMITTAL LETTER

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

500002628645--5
-08/31/98--01067--017
*****78.75 *****78.75

SUBJECT: COMPUTER MASTER 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: NAJMUH KARIM
Name (Printed or typed)

594 CALIBRE CREST PKWY #102

Address

ALTAMONTE SPRING FL 32714

City, State & Zip

407 324 2700

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 AUG 31 AM 8:10

FILED

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

PN 94-98

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.

ARTICLE I NAME

The name of the corporation shall be:

COMPUTER MASTER INC

ARTICLE II PRINCIPAL OFFICE

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

415 COUNTRY WOOD CIRCLE
LAKE MARY FL 32746 - 4844

ARTICLE III SHARES

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

5000 SHARES PAR VALUE OF \$1.00 PER SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

NAJMUL KARIM
594 CALIBRE CREST PARKWAY APT 102
ALTAMONTE SPRING FL 32714

ARTICLE V INCORPORATOR

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

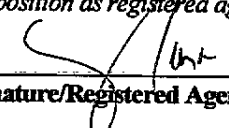
NANCY PEREZ
1201 CORNWALL RD JANFORD FL 32773


Signature/Incorporator

8.28.98
Date

(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


Signature/Registered Agent

8.28.98
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA