P980 CRISMITAL STEP 195

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

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SUBJECT:	MICROCOMP	2000 11		<u>.</u>
	,	ate name - must include suff	98 SEP 21 F SECRETARY TALLAHASSEI	
Enclosed is an original \$70.00 Filing Fee	al and one(1) copy of the articles \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 F. Certified Copy & Certificate	
FROM:	DIAB S. Name (Pr	SEMREE		
	·	RN ANN		
turned	FORT M. City,	YERS. FL State & Zip		
on Iturn Kpress	Daytime T	590- 61 elephone number		
turn Xpress nail envelope provided			40/n	,2

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

ARTICI	ES O	F INCORPO	DATION
ANILLA	The state of the s	r iivi iikkeit	KAIHIN

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

ARTICLE I NAME

The name of the corporation shall be:

MICZOCOMP. ZOOO IN

ARTICLE II PRINCIPAL OFFICE

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

11464

SHAR

ANN DR

APT 2

FORT

Myers, FC

33908

ARTICLE III SHARES

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

10001

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

11464

S. S SHAR

SEMREEN L ANN D

APT 2

FORT MU

MYERS &

33968

ARTICLE V INCORPORATOR

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

DIAB SI

SEMPEEN-Director

DD APT

Jurijus Dukinas APT 2. 6985 Scarboro Dr.

FORT

MUCDE

2200

Ft. Myers, FL

Signature/Incorporator

Aug-11-1998

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

Signature/Registered Agent

AUP_11-1998