P98000096906

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

500002687856---5 -11/16/98--01039--013 ******70.00 ******70.00

T:/	(Proposed corpo	rate name - must include suf	
			ŕ
is an origin	al and one(1) copy of the articl	es of incorporation and a	check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy
		ADDITIONAL CO	& Certificate of Status PPY REQUIRED
FROM:	JAMES L. FOLD Name (P.	rinted or typed)	
	618 XAVIER AV	Address	TAL SL
	MELBOURNE, FL.	32901 State & Zip	CAMASSE
			بدر حاصوني

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

0 240 V

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: \[\int_LORIDA NETWORK COMPUTING,

ARTICLE II PRINCIPAL OFFICE

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

618 XAVIER AV.

MELBOURNE, FL. 32901

ARTICLE III SHARES

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

TEN THOUSAND (10,000)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

FRANK MCINTYRE 618 XAVIER AV.

MELBOURNE, FL. 32901

ARTICLE V **INCORPORATOR**

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

FRANK MCINTURE

618 XAVIER AV.

MELBOURNE, FE. 32801

(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 A