

P99000023241

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LAMARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. ~~Corporate Submissions Inc~~  
(Corporation Name) (Document #)
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99 MAR 12 PM 3:38  
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☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

300002799443--0  
-03/09/99-01063-014  
\*\*\*\*\*78.95 \*\*\*\*\*78.95

| NEW FILINGS                         |                   |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit            |
| <input type="checkbox"/>            | NonProfit         |
| <input type="checkbox"/>            | Limited Liability |
| <input type="checkbox"/>            | Domestication     |
| <input type="checkbox"/>            | Other             |

| AMENDMENTS               |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment                             |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent            |
| <input type="checkbox"/> | Dissolution/Withdrawal                |
| <input type="checkbox"/> | Merger                                |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/QUALIFICATION          |                     |
|-------------------------------------|---------------------|
| <input checked="" type="checkbox"/> | Foreign             |
| <input type="checkbox"/>            | Limited Partnership |
| <input type="checkbox"/>            | Reinstatement       |
| <input type="checkbox"/>            | Trademark           |
| <input type="checkbox"/>            | Other               |

RECEIVED  
99 MAR -9 AM 11:18  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Handwritten signature/initials

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

March 9, 1999

LAZARUS

MIAMI, FL

SUBJECT: COMPUTEK SOLUTIONS INC.  
Ref. Number: W99000005696

We have received your document for COMPUTEK SOLUTIONS INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole  
Corporate Specialist

Letter Number: 599A00011023

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99 MAR 12 PM 3:16  
DIVISION OF CORPORATION

FILED  
99 MAR 12 PM 3:55  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

COMPUTATA SOLUTIONS INC.

### ARTICLE II PRINCIPAL OFFICE

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

4935 S.W. 101 Avenue  
Miami, Florida 33165

### ARTICLE III SHARES

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

1,000 CAPITAL SHARES

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MARIA E. MUSTAFA  
4935 S.W. 101 Avenue  
Miami, Florida 33165

**ARTICLE V INCORPORATOR(S)**

**The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):**

MARIA E. MUSTAFA  
4935 S.W. 101 Avenue  
Miami, Florida 33165

**ARTICLE VI DIRECTOR(S)**

**The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):**

MARIA MUSTAFA - PRES/Vice Pres./Secretary  
4935 S.W. 101 Avenue  
Miami, Florida 33165

**The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 23 day of February, 1999.**

X Maria E Mustafa  
Signature Maria E. Mustafa

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: COMPUTADATA SOLUTIONS INC.

2. The name and address of the registered agent and office is:

MARIA E. MUSTAFA

(NAME)

4935 S.W. 101 Avenue

(P.O. BOX NOT ACCEPTABLE)

Miami, Florida 33165

(CITY/STATE/ZIP)

I 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

*X Maria E Mustafa*

DATE

February 23, 1999

99 MAR 12 3:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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