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Requestor's Name	
Address	
City/State/Zip	Phone #

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-04/08/99-01033-008
*****87.50 *****87.50

Office Use Only

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

FILED
99 APR -8 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BROCK APR 13 1999

**ARTICLES OF INCORPORATION
OF
SYNERGY TECHNOLOGIES, INC.,**

The undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation:

ARTICLE ONE: NAME: The name of the corporation shall be **SYNERGY TECHNOLOGIES, INC.**

ARTICLE TWO: ADDRESS: The Principal place of business and mailing address of the corporation is **425 S. CHICKASAW TRAIL, SUITE 213, ORLANDO, FLORIDA 32825**

ARTICLE THREE: AUTHORIZED SHARES: The corporation is authorized to issue **FOUR** million shares of preferred stock (4,000,000), and no shares of common stock.

ARTICLE FOUR: INITIAL REGISTERED AGENT AND STREET ADDRESS: The name and Florida street address of the initial registered agent is:

**John W. Baker
126 Ingram Circle
Longwood, Florida 32746**

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

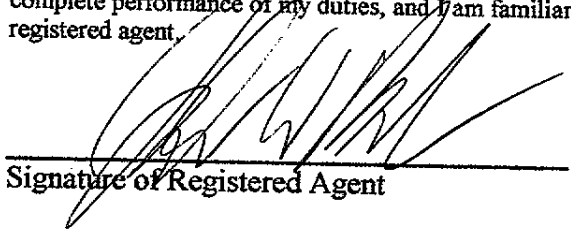
**John W. Baker
126 Ingram Circle
Longwood, Florida 32746**



Signature of Incorporator

3-25-99
Date

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 of Registered Agent

3-25-99
Date

99 APR -8 AM 10:03

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA