

TRANSMITTAL LETTER

P99 0000 47175

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

200002881432--3  
-05/20/99-01081-009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Central Florida Network Solutions, 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 of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Michael Dennis  
Name (Printed or typed)

1 Augusta Circle  
Address

St. Cloud, FL 34769  
City, State & Zip

(407) 892-0831  
Daytime Telephone number

FILED  
99 MAY 20 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

F. CHESLER MAY 2 5 1999

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

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**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.

**FILED**  
99 MAY 20 AM 10: 29

ARTICLE I NAME

The name of the corporation shall be: *Central Florida Technology Solutions, Inc.*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: *1 Augusta Circle  
St. Cloud, FL 34769*

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: *500 at .10 per share*

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: *Michael Dennis  
1 Augusta Circle  
St. Cloud, FL 34769*

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: *Michael Dennis  
1 Augusta Circle  
St. Cloud, FL 34769*

*Michael Dennis*  
\_\_\_\_\_  
Signature/Incorporator

*5/10/99*  
\_\_\_\_\_  
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

*Michael Dennis*  
\_\_\_\_\_  
Signature/Registered Agent

*5/10/99*  
\_\_\_\_\_  
Date