

P99000058768

TRANSMITTAL LETTER

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

400002916664--8
-06/28/99--01041--020
*****78.75 *****78.75

SUBJECT: CHRISTIAN COMPUTERS, INC.

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 & Certified Copy

\$ 78.75
Filing Fee

\$ 87.50
Filing Fee,
Certified Copy
& Cert. Of Status

FROM: **Melanie L. Christian**
1417-3 Del Prado Blvd
Suite # 219
Cape Coral, FL 33990
Phone: (941) 477-8382

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUN 28 PM 3: 10

FILED

gjc 6/29

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: **CHRISTIAN COMPUTERS, INC.**

ARTICLE II PRINCIPAL OFFICE

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

**1417-3 DEL PRADO BLVD
SUITE # 219
CAPE CORAL, FL 33990**

ARTICLE III SHARES

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

500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

**MELANIE L. CHRISTIAN
1417-3 DEL PRADO BLVD
SUITE # 219
CAPE CORAL, FL 33990**

ARTICLE V INCORPORATOR

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

**MELANIE L. CHRISTIAN
1417-3 DEL PRADO BLVD
SUITE # 219
CAPE CORAL, FL 33990**

Melanie L. Christian

Signature/Incorporator Date

6/18/99

DATE

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TALLAHASSEE, FLORIDA
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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

W. Lewis P. Chisler
Signature/Registered Agent Date

6/18/99
DATE

99 JUN 28 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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