

TRANSMITTAL LETTER

P 99000063281

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

500002927045--6
-07/09/99-01039-013
*****87.50 *****87.50

SUBJECT: On The Mark Solutions, Inc.

(Proposed corporate name - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 JUL -9 AM 7:51

FILED

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: Melissa I-Shing Lin

Name (Printed or typed)

12725 Windermere Isle Place

Address

Windermere, FL 34786

City, State & Zip

407-876-6611

Daytime Telephone number

R CHESSEB

JUL 1 6 1999

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

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:

On The Mark Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

160 S. Semoran Blvd.
Orlando, FL 32807

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

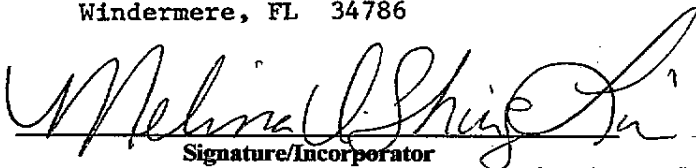
The name and Florida street address of the initial registered agent are:

Michael L. Moore
5458 Hoffner Ave., Suite 303
Orlando, FL 32812

ARTICLE V INCORPORATOR

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

Melissa I-Shing Lin
12725 Windermere Isle Place
Windermere, FL 34786


Signature/Incorporator

6-28-99
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


Signature/Registered Agent

6-24-99
Date

FILED
99 JUL -9 AM 7:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA