

TRANSMITTAL LETTER

P99000102535

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

EFFECTIVE DATE
11-15-99

7000003049917--5
-11/19/99--01076--011
*****78.75 *****78.75

SUBJECT: Strategic Capital Solutions, Inc.
(Proposed corporate name - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 NOV 19 AM 7:45

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:

Graham Cherrington
Name (Printed or typed)

5558 Wilde Oak Way
Address

Sarasota, FL 34232
City, State & Zip

(941) 371-4622
Daytime Telephone number

F. ONESSER

NOV 23 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

EFFECTIVE DATE

11-15-99

The name of the corporation shall be:

Strategic Capital Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5558 Wilde Oak Way
Sarasota, FL 34232

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

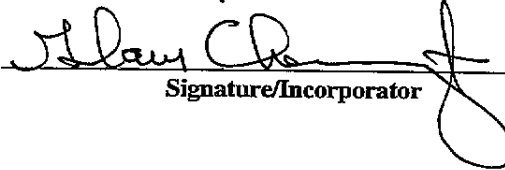
The name and Florida street address of the initial registered agent are:

Graham Cherrington
5558 Wilde Oak Way
Sarasota, FL 34232

ARTICLE V INCORPORATOR

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

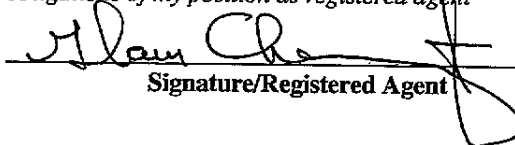
Graham Cherrington
5558 Wilde Oak Way
Sarasota, FL 34232


Signature/Incorporator

11/18/99
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

11/18/99
Date

ARTICLE VI EFFECTIVE DATE

The effective date of the corporation shall be November 15, 1999.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED