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

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SUBJECT: Specialty Office Systems, Inc.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>ude suffix</u>)	
Enclosed are an origi	inal and one (1) copy of the art	icles of incorporation and	d a check for:	
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM: Patricia A. Ferguson Name (Printed or typed) P.O. Box 63 Address Minneola, Fl 34755 City, State & Zip				0'S
				SION OF CO
-	Minneola, Fl 34755 City, State & Zip			OF STATE HS RPORATIONS PM 12: 14
-	352-394-0862 Daytime Telephone number		OHS OHS	

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



ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

Specialty Office Systems, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

20802 S. Buckhill Rd. Clermont, Fl. 34711 Mailing: P.O. Box 63

Minneola, FL 34755

CHICAGO STATIONS
CHARLES OR OR STATIONS

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To manufacture, produce, purchase or otherwise acquire, sell, import, export, distribute and deal in goods, wares, services, merchandise and materials of any kind and description.

The foregoing purposes and activities will be interpreted as examples only and not as limitations, and nothing therein shall be deemed as prohibiting the corporation from engaging in any lawful act or activity for which a corporation may be organized under the General Corporation Law of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Claude D. Ferguson 20802 S. Buckhill Rd. Clermont, Fl. 34711

ARTICLE VIIINCORPORATOR

The name and address of the Incorporator is:

Patricia A. Ferguson P.O. Box 63 Minneola, Fl. 34755

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent

Atricia a Herguson

Dat

2-26-02

Date

Signature/Incorporator