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TRANSMITTAL LETTER

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SECRETALLAPASSE E, FLORIDA

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

000001465800 -04/26/95--01103--008 *****78.75 *****78.75

SUBJECT: IntegraCom, I	nc						
SUBJECT: IntegraCom, II (Proposed corporate	te name - must include suffi	ix)					
Enclosed is an original and one (1)	copy of the articles of	incorporation and a check					
for: [**] \$70.00 [**] \$78.75	\$122.50	\$131.25					
Filing Fee Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate					
	Additional Copy						
1° NO IVI;	n J. Cull me (printed or typed)						
14502 N. Dale Mabry Ste #103							
813-264-1961 Daytime Telephone number		Collogn Cull GAVE					
Daye	une releptione nomber	AUTHORIZATION BY PHONE TO					
		CORRECT PIA address					
		DATE 5/2					
		DOC. EXAM. Of CO					

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

M45-2

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

IntegraCom, Inc.

ARTICLE II PRINCIPAL OFFICE

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

14502 N. Dale Mabry Ste #103 Tampa, Florida 33618

ARTICLE III SHARES

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

500 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS. The name and address of the initial registered agent is:

Ms. Colleen J. Cull 14502 N. Dale Mabry Ste 103 Tampa, F1 33618

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Colleen J. Cull, Pres. 2024 Bearss Ave. E. #1003 Tampa, FL 33613

The unde	ersigned in	corporator(s) ha	s(have) executed these Articles of Incorporation t	his
24	_ day of _	April	, 19 <u>95</u>	
		Pollee	n G. Cull Signature	
			Signature	
			Signature	
			(E)25]	
			Signature	

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTF RED AGENT/REGISTFRED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 507.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNITER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is: IntegraCom, Inc.		· •	··
2.	The name and address of the registered agent and office is:			
		<u></u>	95	
	Colleen J. Cull (NAME)		APR 26	
	1.4502 N. Dale Mabry Suite #103 (P.O. Box or Mail Drop Box NOT ACCEPTABLE)		# 9	E)
	Tampa, Florida 33618 (CITY/STATE/ZIP)		28	

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.

Collien 9. Cull Garil 29, 1995

(DATE)