

P96000014/52  
TRANSMITTAL LETTER

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

SUBJECT: ADAMS GROUP COMMUNICATIONS, INC.  
(Proposed corporate name - must include suffix)

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

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FROM:

GARY ALAN ADAMS  
Name (printed or typed)

2055 WOOD ST. Suite 210  
Address

SARASOTA, FL 34237  
City, State & Zip

941-953-2220  
Daytime Telephone number

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

95 FEB 16 PM 12:09

FILED

W96-2756

800001712608  
-02/12/96--01073--018  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

February 6, 1996

**GARY ALAN ADAMS**  
**2055 WOOD STREET**  
**SUITE 210**  
**SARASOTA, FL 34237**

**SUBJECT: ADAMS GROUP COMMUNICATIONS, INC.**  
**Ref. Number: W96000002756**

We have received your document for **ADAMS GROUP COMMUNICATIONS, INC.**, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$70.00.

Please complete **ARTICLE I NAME**.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

**Doris McDuffie**  
Corporate Specialist Supervisor

Letter Number: 396A00005159

## ARTICLES OF INCORPORATION

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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:

ADAMS GROUP COMMUNICATIONS, INC.

### ARTICLE II PRINCIPAL OFFICE

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

2055 WOOD ST, Suite 210  
SARASOTA, Florida 34237

### ARTICLE III SHARES

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

10,000 SHARES NO PAR VALUE

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GARY ADAMS  
2055 WOOD ST, SUITE 210  
SARASOTA, FLORIDA 34237

**ARTICLE V INCORPORATOR(S)**

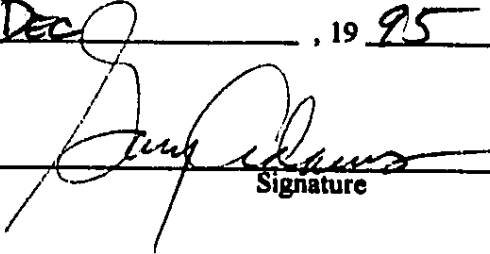
**See instructions for officers/directors**

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

GARY ADAMS  
2055 WOOD ST, Suite 210  
Sarasota, FL 34237

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of Dec, 19 95.

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER 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: ADAMS GROUP COMMUNICATIONS, Inc.

2. The name and address of the registered agent and office is:

GARY A. ADAMS  
(NAME)

2055 WOOD Suite 210  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

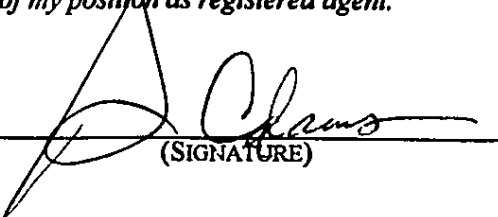
Tallahassee, FL 34230  
(CITY/STATE/ZIP)

TALLAHASSEE, FLORIDA

55 FEB 16 PM 12:09

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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.*

  
(SIGNATURE)

12/1/95  
(DATE)