

# P000000025517

## TRANSMITTAL LETTER

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

000003159000--3  
-03/06/00--01129--014  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: INTEGRATED SUPPORT SERVICES, 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: KENT S. CALABRESE  
Name (printed or typed)

6200 AQUAVISTA DRIVE  
Address

SEBRING, FLA. 33870  
City, State & Zip

(941) 655-3206  
Daytime Telephone number

FILED  
00 MAR -6 PM 12:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

3-13  
WCC

## 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:

INTEGRATED SUPPORT SERVICES, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

6200 AQUAVISTA DRIVE  
SEBRING, FLA. 33870

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### ARTICLE III SHARES

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

5000 SHARES AT \$1<sup>00</sup>/<sub>2</sub> PAR

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KENT S. CALABRESE  
6200 AQUAVISTA DR.  
SEBRING, FLA. 33870

**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):

KENT S. CALABRESE  
6200 AQUAVISTA DRIVE  
SEBRING, FLA. 33870

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

1<sup>ST</sup> day of MARCH, ~~19~~ 2000.



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: INTEGRATED SUPPORT SERVICES, INC.

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


KENT S. CALABRESE  
(NAME)

6200 AQUAVISTA DRIVE  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

SEBRING, FLA. 33870  
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

*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)

1 MARCH 2000  
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314