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

500003201415--5 -04/10/00--01104--009 ******78.75 ******78.75

| l is an origina | al and one(1) copy of the article | Specialists. In rate name - must include suf | |
|----------------------|--|---|--|
| ■ \$70.00 Filing Fee | \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED |
| FROM: | ERICA M. STU Name (P | JART rinted or typed) | |
| | 3457 Inverrary Blvd West | | |
| | | Address | |
| | Lauderhill, | | |
| | City, | State & Zip | |
| | | | |

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

Daytime Telephone number

J4117100

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.

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

00 APR 10 PM 5: 56

ARTICLE I NAME

The name of the corporation shall be:

OFFICE SUPPORT SPECIALISTS, INC.

ARTICLE II PRINCIPAL OFFICE

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

3457 INVERRARY BLVD. WEST LAUDERHILL, FL 33319

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ERICA M. STUART
3457 INVERRARY BLVD. WEST
LAUDERHILL, FL 33319

ARTICLE V INCORPORATOR

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

ERICA M. STUART 3457 INVERRARY BLVD. WEST LAUDERHILL, FL 33319

Signature/Incorporator

4 5 2000

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

Date