POOOOOUTO8 TRANSMITTAL LETTER

500003271075--5 -05/30/00--01138--017 *****78.75 *****78.75

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

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al and one(1) copy of the artic	les of incorporation and a	check for:
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
	(PROPOSED CORPORA al and one(1) copy of the artic \$78.75 Filing Fee	Filing Fee Filing Fee

FROM: BARRY DILLARD

Name (Printed or typed)

P.O. Box 580636

Address

ORLANDO, FL 32858-0636

City, State & Zip

407 - 963 - 3022 Daytime Telephone number 407-397 - 6639

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

03/23



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 9, 2000

BARRY DILLARD 5364 ELM COURT ORLANDO, FL 32811

SUBJECT: FACTSOURCE, INC. Ref. Number: W00000014625

We have received your document for FACTSOURCE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The document must state the number of shares of authorized stock.

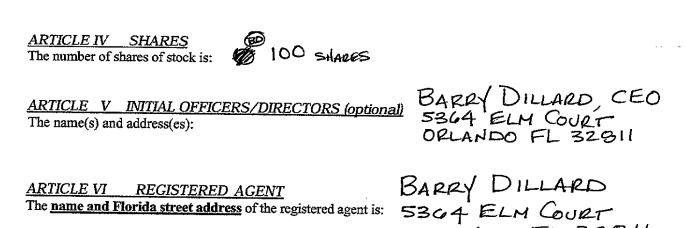
Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6930.

Carolyn Gurr Document Specialist

Letter Number: 500A00032982

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
ARTICLE I NAME The name of the corporation shall be: FACT Source, INC.
ARTICLE II PRINCIPAL OFFICE P.O. BOX 580636 The principal place of business/mailing address is: ORLANDO FL 32858-0636
ARTICLE III PURPOSE The purpose for which the corporation is organized is: NSURANCE NVESTIGATION



OPLANDO FL 32811

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:

BARRY DILLARD

5364 ELM GURT

ORLANDO FL 32811

ature/Incorporator