P00000T7754

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

500003706125--1
-02/15/01--01093--016
*****87.50 *****87.50

SUBJECT: Associated Document Scanning, 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 of Status

☐ $78.75 Filing Fee & Certified Copy

☑ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Karen M. Wheeler
Name (Printed or typed)

413 S. Hawthorn Circle
Address

Winter Spring, FL 32708
City, State & Zip

(407) 695-0951
Daytime Telephone number

FILED
01 FEB 15 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Karen Wheeler GIVE
AUTHORIZATION BY PHONE TO
CORRECT Article IV
DATE 2-16-2001
DOC. EXAM CB

CB 2-16
W-013695

[redacted]

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Associated Document Scanning, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 413 S. Hawthorn Circle, Winter Springs, FL. 32708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Scanning documents for more efficient record keeping. Typically clients will be doctors and lawyers.

ARTICLE IV SHARES

The number of shares of stock is:

1

FILED
01 FEB 15 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Karen M. Wheeler
413 S. Hawthorn Circle
Winter Springs, FL. 32708

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the registered agent is: - Self (owner and operator)

Karen M. Wheeler
413 S. Hawthorn Circle
Winter Springs, FL. 32708

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

****

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Karen M. Wheeler
Signature/Registered Agent

2-12-01
Date

Karen M. Wheeler
Signature/Incorporator

2-12-01
Date