

TRANSMITTAL LETTER
P010000047719

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

SUBJECT: Florida Office Services Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

3000004139743--8
-05/07/01--01129--004
*****70.00 *****70.00

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: John Shawley
Name (Printed or typed)

1737 Sunburst Drive
Address

Apopka, FL 32712
City, State & Zip

(407) 327-3600
Daytime Telephone number

FILED
01 MAY - 7 AM 10:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

gjs/14

Articles of Incorporation for Florida Office Services, Inc.

In compliance with Chapters 607 and 621 of the Florida Statutes

Article I: NAME

The name of the corporation shall be Florida Office Services, Inc..

Article II: PRINCIPAL OFFICE

The principal office and place of business shall be at 351 East State Road 434, Winter Springs, Florida 32708.

Article III: PURPOSE

The purpose for which the corporation is organized is to provide office services to businesses. Such services shall include, but not be limited to, accounting, copying, mailing and other appropriate clerical duties.

Article IV: SHARES

Initially, 100 shares of stock shall be issued by the corporation. Additional stock may be issued by consent of the Board of Directors.

Article V: INCORPORATOR

The name and address of the incorporator is as follows:

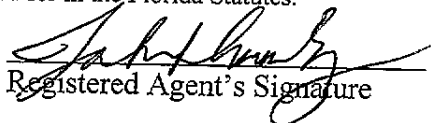
John Shawley
1737 Sunburst Dr.
Apopka, FL 32712

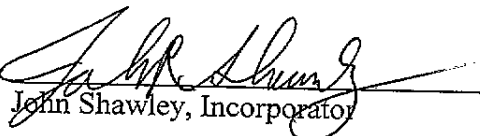
Article VI: REGISTERED AGENT

The name and address of the registered agent is as follows:

John Shawley
1737 Sunburst Dr.
Apopka, FL 32712

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment of registered agent and agree to act in this capacity. I further agree to comply with all the provisions of all statutes relating to the proper and complete performance of all my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in the Florida Statutes.


Registered Agent's Signature


John Shawley, Incorporator

5-4-01
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA