

Pol0000049733

TRANSMITTAL LETTER

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

SUBJECT:

INFO QUEST RESEARCH CORPORATION  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

200004214542--3  
-05/14/01--01068--003  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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: MAGDALENA P. THRESKER  
Name (Printed or typed)

1240 HOBSONS ST.  
Address

LONGWOOD, FL 32750  
City, State & Zip

407 834 5258  
Daytime Telephone number

01 MAY 14 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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

g 5/18

**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: **INFO QUEST RESEARCH CORPORATION**

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: **1240 HOBSON STREET - LONGWOOD - FL 32750**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **TO HAVE THE AUTHORITY TO ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND OF THE STATE OF FLORIDA**

ARTICLE IV SHARES

The number of shares of stock is: **THIS CORPORATION IS AUTHORIZED TO ISSUE 5,000 SHARES OF COMMON STOCK**

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):  
**MAGDALENA P. THRESHER / PRESIDENT - 1240 HOBSON ST. LONGWOOD, FL. 32750**

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

**MAGDALENA P. THRESHER  
1240 HOBSON ST.  
LONGWOOD, FL. 32750**

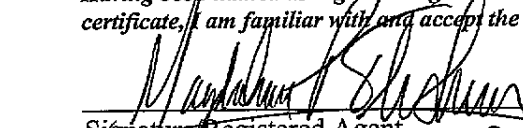
ARTICLE VII INCORPORATOR

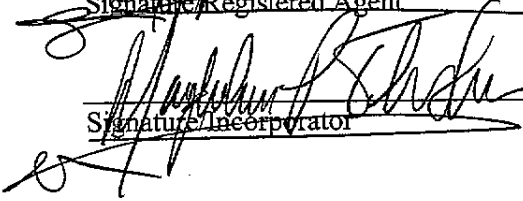
The name and address of the Incorporator is:

**MAGDALENA P. THRESHER  
1240 HOBSON STREET  
LONGWOOD, FL. 32750**

**FILED**  
01 MAY 14 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Registered Agent      **MAGDALENA P. THRESHER**      Date 5/1/01

  
\_\_\_\_\_  
Signature/Incorporator      **MAGDALENA P. THRESHER**      Date 5/1/01