

P010000058125
TRANSMITTAL LETTER

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

AFFI, INC.
13314 HAMNER AVENUE
TAMPA, FL 33612-3468

SUBJECT: _____
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

800004375448--2

-06/07/01--01059--011

*****78.75 *****78.75

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 STANGER
13314 HAMNER AVENUE
TAMPA, FL 33612

John Stanger
AUTHORIZATION BY PHONE TO
CORRECT corp name
DATE 06-12-01
DOC. EXAM g/c

Voice City, State & Zip Fax
(813) 931-5400 / (813) 935-1986
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUN - 7 AM 11:19

FILED

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

g/c 6/12

ARTICLES OF INCORPORATION

OF

ALL FLORIDA FORMS, INC.

ARTICLE I NAME

The name of the corporation shall be:

ALL FLORIDA FORMS, INC.

ARTICLE II PRINCIPAL OFFICE

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

13314 HAMNER AVENUE, NORTH, TAMPA, FL 33612-3468

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100,000.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

**JOHN N. STANGER
13314 HAMNER AVENUE, NORTH
TAMPA, FL 33612-3468**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE V INCORPORATOR

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

JOHN N. STANGER
13314 HAMNER AVENUE, NORTH
TAMPA, FL 33612-3468

The undersigned has executed these Articles of Incorporation this 5th day of JUNE, 2001.

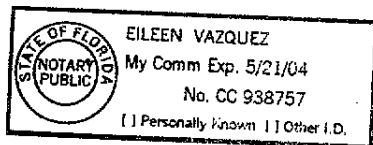

JOHN N. STANGER, Incorporator
13314 HAMNER AVENUE, NORTH
TAMPA, FL 33612-3468

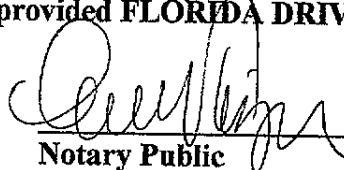
The undersigned has executed these Articles of Incorporation this 5 day of June, 2001.


JOHN N. STANGER, Incorporator

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

Sworn to (or affirmed) and subscribed before me on 6/5, 2001, by John N. Stanger, who is personally known to me or provided **FLORIDA DRIVER LICENSE** as identification.




Notary Public
State of Florida

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:

ALL FLORIDA FORMS, INC.

2. The name and address of the registered agent and office is:

JOHN N. STANGER
13314 HAMNER AVENUE, NORTH
TAMPA, FL 33612-3468

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.



John N. Stanger

Date: 6/5/01