## **TRANSMITTAL LETTER**

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

O'CONNELL GRAPHICS, INC.
(PROPOSED CORPORATE NAME-MUST INCLUDE SUFFEX)

Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a	check for : $7\delta$	.75	
2 970.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing/Fee, Certified Cop & Certificate Status	oy -ef	
FROM:	GARY OCONNE Name (Pri	LL	<u>-</u>		
	4393 S. RAINE	SOW DRIVE		20	
	INVERNESS, F	FL 34452_ State & Zip	ALLAHA:	2001 AUG -	
	(352) 726-1 Daytime Te	048 lephone number		6 AMIO: 36	
	FAX 352	726-66	78	IO: 36	-

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

O'CONNELL GRAPHICS, INC.		2001 AUG -6	AM 10: 36	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:  4393 S. RAINBOW DRIVE INVERNESS, FL 34452	• <del>-</del>	SECRETARY TALLAHASSE	OF STATE E FLORIDA	
ARTICLE III PURPOSE		· · ·		
The purpose for which the corporation is organized is:				•
FREE LANCE ARTWORK AND PUBLICAT	70NS	•		
ARTICLE IV SHARES The number of shares of stock is:				
ARTICLE V INITIAL OFFICERS DIRECTORS (op The name(s) and address(es):	tional)			
,				
ARTICLE VI REGISTERED AGENT				
The <u>name and Florida street address</u> of the registered agent is	:			
GARY O'CONNELL				
4393 S. RAINBOWDRIVE				
INVERNESS, FL 34452_ ARTICLE VII INCORPORATOR				٠
The <u>name and address</u> of the Incorporator is:		<u></u>		
GARY O'CONNELL		• •		
4393 S. RAINBOW DRIVE INVERNESS, FL 34452_ ************************************	-,			
Having been named as registered agent to accept service of process for the	above stated corn	************* oration at the plac		
certificates am familiar with and accept the appointment as registered ager	it and agree to act	in this capacity		- 20
(1, 4)		/_/		

ARTICLES OF INCORPORATION

ARTICLE I NAME

The name of the corporation shall be:

Signature/Incorporator

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