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To:

Division of Corporations

Fax Number

: (850)205-0381

From:

Account Name : CAPITAL CONNECTION, INC.

Account Number : I20000000257 Phone : (850)224-8870

Fax Number : (850)224-8870

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA PROFIT CORPORATION OR P.A.

The Payment Center Inc.

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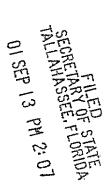
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H01000099424 3

ARTICLES OF INCORPORATION

OF

The Payment Center Inc.



The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is The Payment Center Inc.

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 2424 East 131st Avenue, Tampa, FL 33612.

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of \$1.00 per share.

H010000999424 3

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is Parnell Dickinson, 1646 Wallace Road, Lutz, FL 33549

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The name and address of each member of the initial Board of Directors of the corporation is:

Parnell Dickinson - 1646 Wallace Road, Lutz, FL 33549

Arthur T. Jones - 6433 Renwick Circle, Tampa, FL 33647.

ARTICLE VII: SPECIAL PROVISION

It is the intent of the incorporator and directors that the corporation qualify under Section 1244 of the Internal Revenue Code and that the corporation file as a Sub S Corporation. Such actions as are necessary will be taken by the appropriate officers to accomplish this compliance.

The undersigned has executed these Articles of Incorporation this 13th day of September, 2001.

"Capital Connection, Inc. by Kim Clemons, Client Representative"

A. KIM CLEMONS

HO1000099424 3

H01000099424 3

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned 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	n is: The VA	YMENT CE	uter Inc.
2. 1=:	Variety Dickinson 1646 Wallace for	s of the regis	tered agent	and office
	1646 Wallace for	Loss fl	32549	

HAVE 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 PAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

PARLAHASSEE, FLORIDA PARLAHASSEE, FLORIDA

H01000099424 3