

TRANSMITTAL LETTER

P010000097841

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

SUBJECT:

PSP SERVICES, INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 OCT - 8 PM 2: 5

APPROVED  
AND  
FILED

1000046491-5  
-10/08/01-01082-003  
\*\*\*\*157.50 \*\*\*\*\*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

RECEIVED

01 OCT - 8 PM 2: 17

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

LANE C. NORRIS

Name (Printed or typed)

2292 WEDNESDAY ST. SUITE 2

Address

TALLAHASSEE, FL 32308

City, State & Zip

850-205-6000

Daytime Telephone number

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

10/8

# 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:

PSP SERVICES, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2292 WEDNESDAY STREET, SUITE 2  
TALLAHASSEE, FL 32308

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

## ARTICLE IV SHARES

The number of shares of stock is: 1,000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

LANCE C. NORRIS, Director  
2292 WEDNESDAY ST. SUITE 2  
TALLAHASSEE, FL 32308

## ARTICLE VI REGISTERED AGENT

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

LANCE C. NORRIS  
2292 WEDNESDAY ST. SUITE 2  
TALLAHASSEE, FL 32308

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LANCE C. NORRIS  
2292 WEDNESDAY ST. SUITE 2  
TALLAHASSEE, FL 32308

\*\*\*\*\*  
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

10-8-01  
Date

Signature/Incorporator

10-08-01  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 OCT -8 PM 2:26

APPROVED  
AND  
FILED