TRANSI GALETARY 05009

Department of State Division of Corporati P. O. Box 6327 Tallahassee, FL 3233				FILED 01 OCT 22 A SECRETARY OF TALL AHASSEE
SUBJECT:	FAX EC FA (PROPOSED CORPORAT	E NAME - MUST INC	LUDE SUFFIX)	AH 9: 21
Enclosed are 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,	
FROM:				والمناسب والمسارسان
· -	Name (ALAN P BYRD ATTORNEY AT LAW 1031 IVES DAIRY RI MIAMI FLORIDA 33	0.#228 Addigess ALAN ATT(300004647: -10/22/010 *****78.75 N P BYRD ORNEY AT LAW IVES DAIRY RD #22 MI FLORIDA 33179	•
	305 655 219	State & Zip Compared to State & Zip Compared to State & Zip	Jan By	GAVE

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

WD1-24496

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ARTICLES OF INCORPORATION OF

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FaxTec, Inc.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

THE UNDERSIGNED, acting as incorporators of a corporation under the Florida General Corporation Act, adopt the following articles of incorporation for such corporation:

l.

The name of the corporation is: FaxTec, Inc.

II.

The period of its duration is perpetual.

III.

The general purposes for which the corporation is organized are:

- a. For the general purpose of doing any lawful business.
- b. To do such other things as are incidental to the above or desirable in order to accomplish the foregoing.
- c. To engage in any other lawful trade or business which can, in the opinion of the Board of Directors of the corporation, be advantageously carried on in connection with or auxiliary to the foregoing business.

IV.

The corporation shall have authority to issue 1000 shares, all of one class, no par value.

V.

The address of its initial registered office: 10337 NW 11th Street, Pembroke Pines, Florida. The name of its initial registered agent is Arthur Lewis.

VI.

The number of directors constituting the initial board of directors are two: Stephen Morris, 11978 NW 12 Street, Pembroke Pines, FL 33026 and Arthur Lewis, 10337 NW 11 th Street, Pembroke Pines, Florida 33026.

The principal office of the corporation and mailing address is: 10337 NW 11th Street, Pembroke Pines, FL 33026.

The names and addresses of the incorporators are: Stephen Morris, 11978 NW 12 Street, Pembroke Pines, FL 33026 and Arthur Lewis, 10337 NW 11 th Street, Pembroke Pines, Florida 33026.

VIII.

The initial officers of the corporation are: President: Stephen Morris, Vice President Arthur Lewis.

ΙX

Dated: 10-16-01 Arthur Lewis				
Arthur Lewis				
Incorporator				
STATE OF FLORIDA COUNTY OF MIAMI DADE				
BEFORE ME, the undersigned authority, personally appeared Arthur Lewis who provided his Florida driver's license no.:				
IN WITNESS WHEREOF, I have set my official seal at, Miami Dade County, Florida, this/6_ day of October, 2001.				
SWORN TO AND SUBSCRIBED BEFORE ME THIS 16 day of				
2001.				
My Commission Expires: Notary Public State of Florida				
Personally Known Type of Identification Produced ALAN P. BYRD ALAN P. BYRD MY COMMISSION # CC 906622 EXPIRES: May 14, 2004 Bonded Thru Studget Notary Services OR Produced Identification Type of Identification Produced				

*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.

First that FaxTec, Inc. desiring to organize under the laws of the State of Florida, with its principal office, at 10337 NW 11th Street, Pembroke Pines, Florida 33026. as indicated in the articles of incorporation has named: ARTHUR LEWIS, as its agent to accept service of process within this State.

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.

SIGNATURE

Arthur Lewis Registered Agent

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