

TRANSMITTAL LETTER

P020000026353

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

SUBJECT: ANSWER ALL COMMUNICATIONS INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

600005041886-6
-03/04/02-01112-018
*****87.50 *****87.50

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: JOAN M. REPPi
Name (Printed or typed)

4864 JACARANDA HEIGHTS DRIVE
Address

VENICE, FL 34293
City, State & Zip

941 408-0913
Daytime Telephone number

02 MAR -4 PM 12:19
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

103-11-07

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:

ANSWER ALL COMMUNICATIONS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4864 JACARANDA HEIGHTS DRIVE
VENICE, FL 34293

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SERVICE FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

RES. JOAN M. KEPPI 4864 JACARANDA HEIGHTS DR. VENICE, FL 34293
PRES. JAMES V. KEPPI JR. 4864 JACARANDA HEIGHTS DR. VENICE, FL 34293
VP DENNIS P. BUSCHLE 1135 WOODMANCY RD. TULLY, NY 13059
VP PATRICIA A. BUSCHLE 1135 WOODMANCY RD TULLY, NY 13159

ARTICLE VI REGISTERED AGENT

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

JOAN M. KEPPI
4864 JACARANDA HEIGHTS DRIVE
VENICE, FL 34293

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES V. KEPPI JR.
4864 JACARANDA HEIGHTS DRIVE
VENICE, FL 34293

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

Joan M. Keppi
Signature/Registered Agent

2/28/02
Date

James V. Keppi Jr.
Signature/Incorporator

2/28/02
Date

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA