

TRANSMITTAL LETTER

**P02000037923**

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

700005180187--8  
-04/01/02--01073--012  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Reporting Done Right, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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: Barbara Maxwell  
Name (Printed or typed)

5 Ballard Lane  
Address

Palm Coast, FL 32137  
City, State & Zip

386-446-8082  
Daytime Telephone number

02 APR - 1 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

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

04-08-02

**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:

Reporting Done Right, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

5 Ballard Lane  
Palm Coast, FL 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Self-employed court reporter

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):

ARTICLE VI REGISTERED AGENT

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

Barbara Maxwell  
5 Ballard Lane  
Palm Coast, FL 32137

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Barbara Maxwell  
5 Ballard Lane  
Palm Coast, FL 32137

\*\*\*\*\*  
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

Barbara Maxwell

Signature/Registered Agent

3-29-02

Date

Barbara Maxwell

Signature/Incorporator

3-29-02

Date

02 APR - 1 AM 11:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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