

P02000097762

TRANSMITTAL LETTER

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

FILED  
02 SEP 18 AM 9:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA 2  
400007842034  
-09/19/02-01020-004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: INTERNATIONAL INFRARED IMAGING, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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,  
Certified Copy  
& Certificate of  
Status  
ADDITIONAL COPY REQUIRED

FROM: INTERNATIONAL INFRARED IMAGING, INC.  
Name (Printed or typed)  
ATTN: MONICA MIGLIASSI

12728 Newfield Drive  
Address

ORLANDO, FL 32837-7434  
City, State & Zip

407-888-2504  
Daytime Telephone number

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

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**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:

*INTERNATIONAL INFRARED IMAGING, INC*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*12728 Newfield Dr  
ORLANDO, FL 32837*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*PROVIDING PHOTO IMAGING AND SURVEYING*

**ARTICLE IV SHARES**

The number of shares of stock is: *1000*

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

*MONICA M. MIGLIASSI  
12728 Newfield Drive  
ORLANDO, FL 32837-7434*

**ARTICLE VI REGISTERED AGENT**

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

*FIRSTTRUST ADVISOR INC  
1936 Boothe Circle  
LONGWOOD, FL 32750*

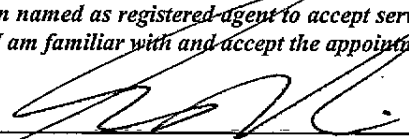
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*MONICA M. MIGLIASSI  
12728 Newfield Dr  
ORLANDO, FL 32837*

\*\*\*\*\*

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

*9/9/02*  
Date

*Monica Migliassi*  
Signature/Incorporator

*9/9/02*  
Date

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