

P02000104679

TRANSMITTAL LETTER

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

100008019351--8  
-03/25/02--01062--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: SIGNATURE PROCESSING, 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 Status

FROM:

LISA LOMBARDI

Name (printed or typed)

9751 MARLINTON LANE

(Address)

PORT RICHEY, FL 34668

(City/State//Zip)

(727) 819-1661

(Day time telephone number)

FILED  
02 SEP 25 AM 8:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one (1) copy of the Articles

DIVISION OF CORPORATIONS, P.O. BOX 6327 TALLAHASSEE, FL 32314

✓  
9/20

**ARTICLES OF INCORPORATION**

OF

**SIGNATURE PROCESSING, INC.**

**FILED**

**02 SEP 25 AM 8:44**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

---

The undersigned incorporation (s) , for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt (s) the following Articles of Incorporation.

**ARTICLE I NAME**

The name of the corporation shall be:

**SIGNATURE PROCESSING, INC.**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

**9751 MARLINTON LANE  
PORT RICHEY, FL 34668**

**ARTICLE III CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is

**1000 SHARES NON-PAR**

**ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is:

**JAMES H. COLLIER, SR.  
9110 STERLING LANE  
PORT RICHEY, FL 34668**

**ARTICLE V INCORPORATOR(S)**

The name (s) and street address (s) of the Incorporator (s) to these Articles of Incorporation  
is (are):

LISA LOMBARDI (PRESIDENT)  
9751 MARLINTON LANE  
PORT RICHEY, FL 34668

The undersigned has (have) executed these Articles of Incorporation this

23RD \_\_\_\_ DAY \_\_\_\_ OF SEPTEMBER \_\_\_\_ 2002

 P \_\_\_\_ Signature/Title

\_\_\_\_ V-P \_\_\_\_ Signature/Title

\_\_\_\_ SEC \_\_\_\_ Signature/Title

\_\_\_\_ Signature/Title

\_\_\_\_ Signature/Title

FILED

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

02 SEP 25 AM 8:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA  
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER LAWS  
OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIG-  
NATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF  
FLORIDA.

1. The name of the corporation is: \_

SIGNATURE PROCESSING, INC.

The name and address of the registered agent and office is:

JAMES H. COLLIER SR.  
(Name)

9110 STERLING LANE  
(P. O. Box not acceptable)

PORT RICHEY, FL 34668  
(City/State/Zip)

I have been named as registered agent and to accept service of process for the  
aboved 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 perfor-  
mance of my duties, and I am familiar with and accept the obligations of my position  
as registered agent.

(Signature)

(Date)