

PD3000123997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

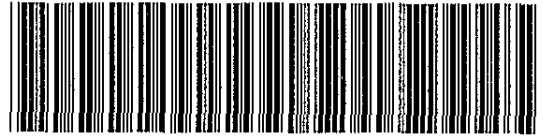
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: Image Systems, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Image Systems, Inc

Name (Printed or typed)

1600 Samo Road

Address

Melbourne, Florida 32935

City, State & Zip

321-259-8115

Daytime Telephone number

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

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:

Image Systems, inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1600 Sarno Rd.

Melbourne, Fl 32935

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is:

1000 Shares with a value of \$1.00 per Stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Paul Brown / President

1600 Sarno Rd

Melbourne, Fl 32935

Dean Soukeras/ VP

1600 Sarno Rd

Melbourne, Fl 32935

ARTICLE VI REGISTERED AGENT

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

Dean Soukeras

1600 Sarno Rd

Melbourne, Fl 32935

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dean Soukeras

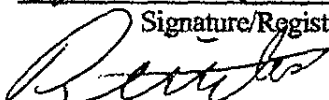
1600 Sarno Rd

Melbourne, Fl 32935

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



Signature/Incorporator

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/16/03

Date

10/16/03

Date