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SECRETARY OF STATE  
DIVISION OF CORPORATE

J. Silvers JUN 28 2005

## TRANSMITTAL LETTER

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

**SUBJECT:** Information Risk Management 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  
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:** John I. Adams  
Name (Printed or typed)

21 Island Dr.  
Address

Treasure Island, FL 33706  
City, State & Zip

(727) 367-6225  
Daytime Telephone number

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

**Articles of Incorporation  
of  
Information Risk Management Systems, Inc.**

**ARTICLE I      NAME**

The name of the corporation shall be:    Information Risk Management Systems, Inc..

**ARTICLE II      PRICIPAL OFFICE**

The principal place of business/mailling address is:  
21 Island Drive; Treasure Island, FL 33706

**ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is to market, install, develop and provide and train personnel in the use of specialized computer hardware and software, to organizations utilizing and disseminating information.

**ARTICLE IV      SHARES**

The number of shares is 1000.

**ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS**

President/CEO	Treasurer/Secretary
John I. Adams	Ruth L Adams
21 Island Dr.	21 Island Dr
Treasure Island, FL 33706	Treasure Island, FL 33706

**ARTICLE VI      REGISTERED AGENT**

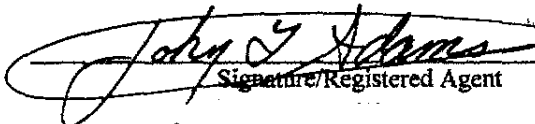
The name and Florida street address of the registered agent is:  
John I. Adams; 21 Island Dr.; Treasure Island, FL 33706

**ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:  
Ruth L. Adams; 21 Island Dr.; Treasure Island, FL 33706

\*\*\*\*\*

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

6-22-2005  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

6/22/05  
\_\_\_\_\_  
Date

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