PO60000 83397

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	3
Special Instructions to Filing Officer:	
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ECRETARY OF STATE

FILED

COVER LETTER

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

Enclosed are an original and one (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
	ADDITIONAL CO	
FROM: Richard A	Wight (Printed or typed)	
	. 1.	
805 Mader	ia Circle	

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. (Profi	it)
ARTICLE I NAME The name of the corporation shall be: IMM Rduale	Impact Lucorporated
Talla	laderia Circle hassee, Ha. 32312
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	siness (consulting)
ARTICLE IV SHARES The number of shares of stock is: 100	
ARTICLE V INITIAL OFFICERS AND/OR DIRECT List name(s), address(es) and specific title(s): Richard 805 Mad	A Winght-owner/CE
Tallaha	egce, fla 32312
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable 805 Maderia Circle ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Nichard A Wright 805 Maderia Circle	FILED 06 JUN 20 PM 4: 42 SECRETARY OF STATE TALLAHASSEE, FLORIDA
TACLANASCE, HA 32312 *********************************	and agree to act in this capacity
Signature/Registered Agent	Date 6-20-06
Signature/Incorporator	Date