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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : INCORPORATING SERVICES FL

Account Number: I20050000052 : (850)656-7956 Phone Fax Number : (850)656-7953

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:					

FLORIDA PROFIT/NON PROFIT CORPORATION

United Sources Sought, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

APR - 7 2016 A. DUNLAP



ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE II PRI	NCIPAL OFFICE Principal street address		Mailing address, if different is:		
150 Bernwood Dri	ve, Unit 5	7870 Lel	7870 Lehigh Crossing		
nita Springs, FL 3	4135	Victor, N	Victor, NY 14564		
TICLE III PUR	POSE h the corporation is organized is: any lawfu	ıl business purpose.			
		·			
		 			
 	<u> </u>				
	RES 200 shares Common Stock, no postock is:	par value	•		
number of shares TICLE V INIT Name and T	of stock is: **IAL OFFICERS AND/OR DIRECTORS** itle: **Richard T. Aab, CEO & Director**	oar value Name and Title	` <u></u>		
number of shares	Of stock is:		Denise Metivier, President & Direction 19870 Lehigh Crossing Victor, NY 14564		
number of shares TICLE V INIT Name and T	of stock is: "IAL OFFICERS AND/OR DIRECTORS itle: Richard T. Aab, CEO & Director 7870 Lehigh Crossing	Name and Title	7870 Lehigh Crossing		
number of shares TICLE V INIT Name and T	TAL OFFICERS AND/OR DIRECTORS itle: Richard T. Aab, CEO & Director 7870 Lehigh Crossing Victor, NY 14564	Name and Title Address:	7870 Lehigh Crossing Victor, NY 14564 Ed McGrattan, COO & Director		
Name and Ti	of stock is: CIAL OFFICERS AND/OR DIRECTORS itle: Richard T. Aab, CEO & Director 7870 Lehigh Crossing Victor, NY 14564 David B. Venturo, CFO & Director 7870 Lehigh Crossing	Name and Title Address: Name and Title	7870 Lehigh Crossing Victor, NY 14564 Ed McGrattan, COO & Director		
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Name and Ti	of stock is: CAL OFFICERS AND/OR DIRECTORS	Name and Title Address: Name and Title	7870 Lehigh Crossing Victor, NY 14564 Ed McGrattan, COO & Director 7870 Lehigh Crossing		
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Name and Ti Address Name and Ti Address	of stock is: CAL OFFICERS AND/OR DIRECTORS	Name and Title Address: Name and Title Address:	7870 Lehigh Crossing Victor, NY 14564 Ed McGrattan, COO & Director 7870 Lehigh Crossing		

Name and Title:		Name and Title:				
Address		Address:				
			•			
			,			
ARTICI F VI	REGISTERED AGENT		•			
	lorida street address (P.O. Box NOT acceptable)	of the registered agent is:				
Name:	Paracorp Incorporated					
Address:	155 Office Plaza Drive, 1st Floor	<u> </u>				
	Tallahassee, FL 32301					
ADTICE E UII	INCORDOR (TOR					
AKTICLEVII	INCORPORATOR	•				
The name and a	ddress of the Incorporator is:					
Name;	Mary Ellen Schantz, Paralegal					
Address:	1600 Bausch & Lomb Place					
	Rochester, NY14604					
ABTICLE WILL	EFFECTIVE DATE.					
Effective date, if	EFFECTIVE DATE: fother than the date of filing:	(OPTIONAL)			
(If an effective days after the f	date is listed, the date must be specific and can	not be more than five busine	ess days prior or 90 business			
Note: If the dat	e inserted in this block does not meet the applicate effective date on the Department of State's record	ole statutory filing requirement is.	s, this date will not be listed as			
this certificate, I	med as registered agent to accept service of proc am familiar with and accept the appointment as Paracorp Incorporated	ess for the above stated corpo registered agent and agree to a	ration at the place designated i act in this capacity			
	attached		4/5/16			
	Required Signature/Registered Agent		Date			
I submit this do document to the	cument and affirm that the facts stated herein a Department of State constitutes a third degree fe	ire true. I am aware that the j lony as provided for in s.817.1	false information submitted in 55, F.S.			
More	Eller Schart		4-4-16			
Requ	uired Signature/Incorporator		Date			

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 4/5/2106

ENTITY NAME: United Sources Sought, Inc.

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Sharon Cooke, Assistant Secretary

Paracorp Incorporated .