

P23000019307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

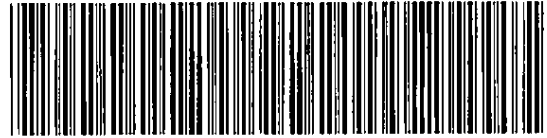
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 MAR 13 4:43 PM

2023 MAR 13 AM 11:59  
SECRETARY OF STATE

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2023 MAR -7 PM 3:41  
ALLAHASSEE, LLC

RECEIVED

**Release and Permission to Use Name**

March 10, 2023

To: Department of State Division of Corporations

Re: Release and permission to use name

Entity's name: CONTACT CENTER COMPLIANCE CORPORATION

Florida document or registration number: P22000091627

The date the document was filed with the Division of Corporations: 12/12/2022

I give my permission to release the name CONTACT CENTER COMPLIANCE CORPORATION and to make available to the Division of Corporations for use by others.

Sincerely,

Printed Name: Ronald Allen

Title: CEO

**FILED**  
2023 MAR 13 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE, FL

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

Please use funds from this account: 120210000160: 70.00

Authorization Signature: *Jan Tull*

     Contact Center Compliance Corporation                     

**BUSINESS NAME** **DOCUMENT #**

     Certified Copy of Articles of Organization

     Certificate of Status

**NEW FILINGS**

     Profit Corp  
     Not for Profit  
     Limited Liability  
     Domestication  
     Other  
  X   **CORP**  
     **LLLP**

**OTHER FILINGS**

     Annual Report  
     Fictitious Name  
     APOSTILLE      **Country**

**AMMENDMENTS**

     Amendment  
     Resignation of R.A. Officer/Director  
     Change of Registered Agent  
     Dissolution  
     Merger  
     **Conversion**  
     **Amended and restated Articles**  
     **Statement of Authority**

**REGISTRATION/QUALIFICATIONS**

     Foreign filing  
     Limited Partnership  
     Reinstatement  
     Other

**EXAMINER'S INITIALS:**

## COVER LETTER

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

**SUBJECT:** Contact Center Compliance Corporation  
(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      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Contact Center Compliance Corporation  
Name (Printed or typed)

6247 Seminole Blvd, Suite 400  
Address

Seminole, FL, 33772  
City, State & Zip

888-650-3738  
Daytime Telephone number

rick@synergmarketing.com  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 8, 2023

FLORIDA CAPITAL COURIER SERVICES, INC.

SUBJECT: CONTACT CENTER COMPLIANCE CORPORATION  
Ref. Number: W23000031669

We have received your document for CONTACT CENTER COMPLIANCE CORPORATION. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham  
Regulatory Specialist III  
Director's Office

Letter Number: 523A00005380

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2023 MAR 13 PM 2:49  
DIRECTOR'S OFFICE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**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: Contact Center Compliance Corporation

**ARTICLE II PRINCIPAL OFFICE**

Principal ~~street~~ address  
6247 Seminole Blvd, Suite 400  
Seminole, FL, 33772

Mailing address, if different is:  
6247 Seminole Blvd, Suite 400  
Seminole, FL, 33772

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

The Company Primarily engages in providing Infrastructure for hosting or data processing Services.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FL

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: CEO- Ronald Allen II Name and Title: CFO- Ronald Allen II

Address 6247 Seminole Blvd, Suite 400 Address: 6247 Seminole Blvd, Suite 400  
Seminole, FL, 33772 Seminole, FL, 33772

Name and Title: Director- Ronald Allen II Name and Title: Secretary- Ronald Allen II

Address 6247 Seminole Blvd, Suite 400 Address: 6247 Seminole Blvd, Suite 400  
Seminole, FL, 33772 Seminole, FL, 33772

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Legacy RA Group, Inc

Address: 2330 Clare Dr

Tallahassee, FL, 32309.

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SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Ronald Allen II

Address: 6247 Seminole Blvd, Suite 400

Seminole, FL, 33772

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*



Required Signature/Registered Agent

3/7/23

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Ronald Allen II

Required Signature/Incorporator

3/7/2023

Date