

P95000021035

TRANSMITTAL LETTER

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

800001429568
-03/15/95--01006--005
*****78.75 *****78.75

SUBJECT: VISIONWARE, INC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM:

GARY R. NOEL

Name (printed or typed)

7869 BROKEN ARROW TRAIL

Address

WINTER PARK FL 32792

City, State & Zip

407-657-0500

Daytime Telephone number

2/15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 MAR 14 PM 1:10

FILED

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

ARTICLES OF INCORPORATION
OF

VISIONWARE, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

VISIONWARE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

7869 BROKEN ARROW TRAIL
WINTER PARK, FL 32792

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

GARY R. NOEL
7869 BROKEN ARROW TRAIL
WINTER PARK FL, 32792

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TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

GARY R. NOEL
7869 BROKEN ARROW TRAIL
WINTER PARK, FL 32792

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

9TH day of MARCH., 1995.



Signature

Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

VISIONWARE, INC.

2. The name and address of the registered agent and office is:

GARY R. NOEL

(Name)

7869 BROKEN ARROW TRAIL

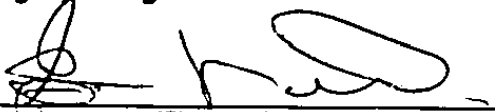
(P.O. Box not acceptable)

WINTER PARK FL 32792

(City/State/Zip)

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Signature)

3-09-95