(Requestor's Name) 890 S.W. 87 AVENUE, SUITE: 16 (Address) OFFICE USE ONLY

MIAMI, FLORIDA 33174 (305)552-5973

(City, State, Zip) (Phone #1

LOCAL REPRESENTATIVE TALLAHASSEE

(904)385-6715

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

Other

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CR2E031(10/92)



FLORIDA DEPARTMENT OF STATE

August 8, 1995

Sandra B. Mortham Secretary of State

LAZARUS

MIAMI, FL

SUBJECT: COPYNET OFFICE SYSTEM INC.

Ref. Number: W95000015926

We have received your document for COPYNET OFFICE SYSTEM INC. and check(s) totaling \$122.50. However, your check(s) and document are being returned for the following:

The registered agent and registered office listed in your articles of incorporation must be consistent throughout the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6931.

Letter Number: 095A00037128

Steven Godfrey Corporate Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF INCORPORATION

OF

COPYNET OFFICE SYSTEM INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above named corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the laws of the State of Florida.

ARTICLE 1

The name of this corporation shall be:

COPYNET OFFICE SYSTEM INC.

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ARTICLE 11

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposes proposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) / Transact any and all lawful business.
- (2) Said corporation shall further have powers: To have perpetual succession by its corporate name;

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

Osvaldo Dreispiel 15555 S.W. 55th Street
Miami, Florida 33185

The Principal office shall be:

12357 SW 132 Court Mimai, Florida 33186

ARTICLE VI

The initial Board of Directors shall consist of a total of (1) person, and the name and address of the person who is to serve as an initial director is:

Osvaldo Dreispiel 15555 SW 55th Street
Miami, Florida 33185

The name and address of the incorporator executing these Articles of Incorporation is:

Osvaldo Dreispiel 15555 SW 55th Street
Miami, Florida 33185

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 28th day of July , 19 95

COUNTY OF DADE } ss.

BEFORE ME, a notary public authorized to take acknowledgements in the state and county set forth above, personally
appeared Osvaldo Dreispiel known to me and
known by me to be the person(s) who executed the foregoing
Articles of Incorporation, and he (they) acknowledge before
me that he (they) executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the state and county aforesaid, this 28th day of July , 1995.

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 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.

The na	ame of the corporation is: COPYNET OFFICE SYSTEM INC.	
The na	ame and address of the registered agent and office is:	•
·	OSVALDO DREISPIEL (NAME)	
	15555 SW 55th Street	
	(P.O. BOX <u>NOT</u> ACCEPTABLE)	
	Miami, Florida 33185	
	(CITY/STATE/ZIP)	

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

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SE FOR ACCEPTABLE STATE

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