P96000003089

96 JAN -8 PH 12: 20

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

KETRIEVER

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$122.50 \$131.25 Filing Fee Filing Fee Filing Fee & Certified Copy Filing Fee, Certified Copy & Certificate & Certificate Additional Copy Required FROM: Name (printed or typed) Daytime Telephone number 600001681576 -01/08/96--01069--001 *****70.00 *****70.00

(Proposed corporate name - must include suffix)

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

ARTICLES OF INCORPORATION

FILED 96 JAN -8 PH 12: 20

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

ARTICLEI

The name of the corporation shall be:

RETRIEVER PAYMENT SySTEMS of KORIDA INC. ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 121 MEADOWLANDS DRIVE ROYAL PALM BEACH FLORIDA 33411

> ARTICLE III **SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 1000

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV The name and address of the initial registered agent is:

AURENCE M. RYSER
121 MEADOWLANDS DRIVE
ROYAL PALM BEACH FLORISA
33411

ARTICLEV INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are): LAWRENCE M. PYSER
121 MEADOWHANDS DRIVE
TROYAL PALM BEACH FLORIDA 33.4/1
SANDRA D. PYSER
121 MEADOWHANDS DRIVE 121 MEADOUNAND ENTER FLORIDA ROYAL PALM BETTER FLORIDA 33411

The undersigned incorporator(s) has(have) executed these Articles of Incorporation thi
6 day of \overline{AN} 19 96
(Januce in Blue
Dudia D. Pe
Signature Signature
Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

CE FULLED

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

1. The name of the corporation is:	KETRIEVER VAYMENT SYSTEMS
	OF FLORIDA INC.

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

LAWRENCE	- m.	PYSEN	2
	(Name)		
121 MEI	7D0W	ANDS	DEIVE
(P.O. Box or Mail	Drop Box NO	TACCEPTABLE)	
HoyAL F	pln (SEANH	f/20124
(C	ITY/STATE/ZIP)		3241

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.

Surence Male 1-6-96
(Significations) (DATE)