

P96000013798

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

NAME _____
FIRM _____
ADDRESS _____

PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Mailor No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

pk 2/14/96

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	2/14		
TIME	12:00		CK No. _____
BY	CD		

WALK-IN
Will Pick Up _____

RE: American Monitoring Corp., Inc.

No. 52280

96 FEB 14 AM 11:09

TALLAHASSEE, FLORIDA
C.D. FEE \$ 131.25

☒	Capital Express™		
☒	Art. of Inc. File		
☐	Corp. Record Search		
☐	Ltd. Partnership File		
☒	Foreign Corp. File		
☒	() Cert. Copy(s)		
☐	Art. of Amend. File		
☒	Dissolution/Withdrawal		
☒	C U B. 6/5		
☐	Fictitious Name File		
☐	Name Reservation		
☐	Annual Report/Reinstatement		
☐	Reg. Agent Service		
☐	Document Filing		
☐	Corporate Kit		
☐	Vehicle Search		
☐	Driving Record		
☐	Document Retrieval		
☐	UCC 1 or 3 File		
☐	UCC 11 Search		
☐	UCC 11 Retrieval		
☐	File No.'s, _____ Copies		
☐	Courier Service		
☐	Shipping/Handling		
☐	Phone ()		
☐	Top Priority		
☐	Express Mail Prep.		
☐	FAX ()	pgs.	
SUBTOTALS			

400001714554
-02/14/96--01016-026
****131.25****131.25

FEE.....	\$
DISBURSED.....	\$
SURCHARGE.....	\$
TAX on corporate supplies.....	\$
SUBTOTAL.....	\$
PREPAID.....	\$
BALANCE DUE.....	\$

RECEIVED
96 FEB 14 AM 10:08
DIVISION OF CORPORATION

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

ARTICLES OF INCORPORATION

FILED

96 FEB 14 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

American Monitoring Corp., Inc.

ARTICLE II PRINCIPAL OFFICE

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

201 North New York Avenue, Suite 302
Winter Park, Florida 32789-3136

ARTICLE III SHARES

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

100,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michael S. Borchbeck
201 North New York Avenue
Suite 302
Winter Park, Florida 32789-3136

ARTICLE V 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):

Michael S. Borchuck
201 North New York Avenue
Suite 302
Winter Park, Florida 32789-3136

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

13th day of February, 19 96.



Signature

Michael S. Borchuck

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**

FILED

56 FEB 14 AM 11:10

SECRETARY OF STATE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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: American Monitoring Corp., Inc.
2. The name and address of the registered agent and office is:

Michael S. Borchbeck
(NAME)

201 North New York Avenue, Suit 302
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

Winter Park, Florida 32789-3136
(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.

Michael Borchbeck
(SIGNATURE)

(DATE)