

P96000019018

TRANSMITTAL LETTER

FILED

96 FEB 28 AM 9:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: Action Check Service Center Inc.
(Proposed corporate name)

300001726933
-02/28/96--01084--004
*****70.00 *****70.00

Enclosed is an original and one (1) copy of the articles of incorporation and a check for
\$ 35.

FROM:

Hermen A Cruz
Name (printed or typed)
36 E. MAIN Street
Address
APOPKA, Florida 32703
City, State, & Zip
1-407-884-0495 / 330-0458
Telephone Number

Hermen A. Cruz GAVE
AUTHORIZATION BY PHONE TO
CORRECT Registered Office
DATE 3-1-96
DOC. EXAM JA

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

3-1-96
JA

ARTICLES OF INCORPORATION

OF

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**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: *Action Check Service Center Inc.*

ARTICLE II PRINCIPAL OFFICE

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

*36 E. MAIN ST.
APOPKA, FL. 32703*

ARTICLE III SHARES

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

200

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: *Hermen A. Cruz
3838 ORLANDO DR
SANFORD, FL. 32773*

ARTICLE V. INCORPORATOR(S)

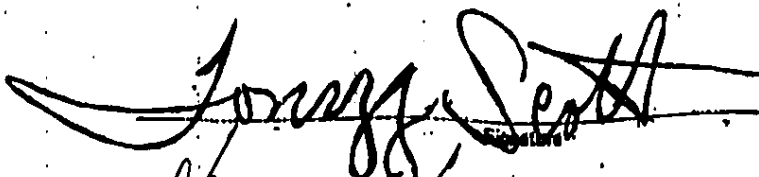
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

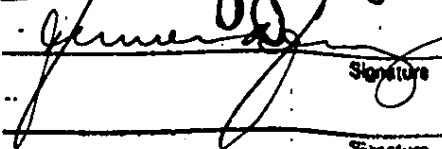
Tony J. Scott
8629 Ridgeman Court
Orlando, FL 32818

Hermen A. Cruz
681 Oswego Ct
Winter Springs, FL 32708

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

22 day of February, 1996.



Signature


Signature

Signature

Articles of Incorporation
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF
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.

1. The name of the corporation is: Action Check Service Center Inc.

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

Hermen A Cruz
(Name)

3338 Orlando Avenue
(P.O. Box NOT acceptable)

Sanford, Florida 32773
(City/State/Zip)

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SECRET
TALLAHASSEE, FLORIDA

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

Hermen A Cruz

DATE

2-22-96

REGISTERED AGENT FILING FEE: \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314