

# P96000052577

**CAPITAL CONNECTION, INC.**

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904) 224-8870  
 Mailing Address: Post Office Box 10149, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

No 53085

RE: The Adam Corporation

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

*Jeff Strouse* GAVE  
 AUTHORIZATION BY PHONE TO  
*add of Tampa*  
 DATE 6/20/96  
 DOC. EXAM. BR

*W46-12938*  
*502*

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE			
TIME	<i>Open</i>		CK No.
BY	<i>Open</i>		

WALK-IN Will Pick Up 6/18 12:00

	G.C. FEE.	DISBURSED
Capital Express™		
<input checked="" type="checkbox"/> Art. of Inc. File		
Corp. Record Search		
Ltd. Partnership File		
Foreign Corp. File		
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)		
Art. of Amend. File		
Dissolution/Withdrawal		
C U B		
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 Prop.		
FAX ( ) pgs.		
SUBTOTALS		

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

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  
OF**

**THE ADAM CORPORATION OF TAMPA**

FILED  
96 JUN 10 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I: NAME**

The name of the corporation is THE ADAM CORPORATION OF TAMPA

**ARTICLE II: PRINCIPAL OFFICE**

The principal place of business and mailing address of the corporation is 15922 Wyndover, Tampa, Florida 33647.

**ARTICLE III: CAPITAL STOCK**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of one dollar (\$1.00) per share.

**ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is Charles A. Davis, 15922 Wyndover, Tampa, Florida 33647.

**ARTICLE V: INCORPORATOR**

The name and address of the incorporator of these Articles of Incorporation is Charles A. Davis, 15922 Wyndover, Tampa, Florida 33647.

**ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The names and address of the members of the initial Board of Directors of the corporation are Charles A. Davis, 15922 Wyndover, Tampa, Florida 33647, and James Majirsky, 6241 Greenwich Drive, Tampa, Florida 33647.

The undersigned has executed these Articles of Incorporation this 13<sup>th</sup> day of June, 1996.

  
Charles A. Davis, Incorporator

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

Pursuant to the provision of Section 607.0501, Florida Statutes, the mentioned 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: The Adam Corporation of Tampa,
2. The name and street address of the registered agent and office is:

**Charles A. Davis  
15922 Wyndover  
Tampa, FL 33647**

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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

  
\_\_\_\_\_  
Charles A. Davis

FILED  
95 JUN 18 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA